

A REPORT FROM THE
NATIONAL COALITION OF ANTI-VIOLENCE PROGRAMS

LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER, AND HIV-AFFECTED

HATE VIOLENCE IN 2014

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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 (LGBTQ), and HIV-affected communities. NCAVP is a national coalition of local member programs and affiliate organizations who create systemic and social change. We strive to increase power, safety, and resources through data analysis, policy advocacy, education, and technical assistance.

PREFACE

2014 was a tumultuous year for LGBTQ and HIV-affected communities nationally. While NCAVP and its member programs continued to strive for a world where LGBTQ and HIV-affected people can live free from violence, the rights of LGBTQ and HIV-affected communities, especially the more marginalized of LGBTQ communities, came under attack in a variety of ways. LGBTQ and HIV-affected communities continued to witness historic wins in 2014 against a national backdrop of open and state-sanctioned discrimination, public discourse and action against police brutality, and the continued crisis of deadly violence against transgender women of color. While overall reports of violence to NCAVP members declined, deadly and severe violence persisted in 2014.

The national crisis of deadly violence against transgender and gender non-conforming people of color continued in 2014; at least 12 transgender people of color were killed in 2014. This violence prompted national outrage and mobilization from the LGBTQ movement, particularly from transgender women of color leaders, with many calling for immediate action to address the epidemic that Laverne Cox famously called a “state of emergency.” This report also continues to highlight that, for the fourth year in a row, transgender people, LGBTQ and HIV-affected people of color, and particularly transgender people of color, experienced disproportionately severe violence.

State-sponsored discrimination against LGBTQ people came in the form of “Religious Liberties” legislation introduced in states such as Arizona, Arkansas, and Indiana. While President Obama signed an executive order in July 2014 outlawing discrimination based on sexual orientation and gender identity for federal employees and contractors, in February of 2014 the Arizona Legislature passed a bill that would have allowed businesses to turn away people based on “religious freedom.” Inspired by anti-LGBTQ advocates reacting to cases in other states, the law would have allowed businesses to discriminate against LGBTQ people or anyone with whom a business owner disagreed on religious grounds. The Arizona law was eventually vetoed by Governor Jan Brewer after pressure from LGBTQ activists and major corporations, however similar measures were recently passed in Indiana and Arkansas. In 2014 the U.S. Supreme Court also allowed a family company, Hobby Lobby, to deny specific reproductive health coverage for employees under the company's health plan by saying the owners have religious objections to providing the coverage. This decision has far reaching impacts as it could provide a means for employers to discriminate against LGBTQ people by denying coverage for such things as reproductive insemination, gender reassignment treatments, or HIV prevention efforts.

In 2014 CeCe McDonald, a transgender woman of color, was released after being prosecuted and incarcerated by the Hennepin County District Attorney after she defended herself in response to a hate violence attack in Minneapolis in 2011. The LGBTQ movement celebrated her release, however in 2014 Nate Mancha in Colorado, Eisha Love in Illinois, and Luke O'Donovan in Georgia were all prosecuted for defending themselves against hate violence attacks. State violence and discrimination remain a pressing issue in the lives of LGBTQ communities.

Police and state violence, specifically against Black communities, came into the mainstream national discourse in 2014 with non-indictments for both police officers responsible for the deaths of Michael Brown and Eric

Garner. The movement fomented by these tragic incidents, reflected in the Black Lives Matter organizing, highlighted the persistent and deadly violence leveled against communities of color and the history of oppressive policing in the United States. While the victims of fatal police violence in 2014 were not LGBTQ identified, there is no lack of such stories in previous years.

From the alleged murder of Marsha P. Johnson by the NYPD in 1992 to the recent police shooting of Jessie Hernandez, a queer Latin@ youth in Colorado, in 2014, LGBTQ people — particularly LGBTQ people of color, transgender and gender non-conforming people, and LGBTQ youth — are disproportionately targeted by the police and subjected to traumatizing forms of state violence.

While mainstream narratives of the recent anti-police brutality movement may have diminished the role of LGBTQ activists, LGBTQ communities remained central to the struggle against police violence; leading marches, organizing protests, and connecting activists and issues nationally. This centrality can be traced back to the birth of the modern gay rights movement – both the Compton Cafeteria protests and the Stonewall movement were in direct response to police brutality and transgender and LGBTQ people of color played a central role in these movements. NCAVP members organized to achieve substantial progress to address anti-LGBTQ and HIV-affected police violence on local levels across the country in 2014. NCAVP members BreakOUT! and the Survivors Organizing for Liberation (formerly the Colorado Anti-Violence Program) continued a national “Know Your Rights” campaign for LGBTQ youth to share resources to reduce harm when interacting with the police and continued to organize for systemic changes in policing practices.

Immigration reform efforts remained at the forefront of progressive movements in 2014, impacting LGBTQ and HIV-affected immigrant communities. An Executive Order signed by President Obama in November of 2014 expanded the Deferred Action for Childhood Arrivals (DACA) program for some undocumented immigrants, however the deportation and detention of a large number of undocumented communities continued. LGBTQ organizations and activists, such as Southerners on New Ground (SONG), Transgender Law Center, Immigration Equality, and many others, continued their efforts to organize for comprehensive and humane reform of immigration policies while opposing state-sponsored violence against undocumented immigrants, of which 267,000 are estimated to be LGBTQ identified.

Same-sex marriage became legal in 18 more states in 2014. Marriage equality is a critical and important issue for many LGBTQ people. However, it is imperative that the fundamental rights of LGBTQ communities are addressed concurrently with the fight for same-sex marriage. There is a long way to go to secure the right to safety, equal employment, healthcare, housing, education, and access to resources for LGBTQ and HIV-affected communities. The right to live free from hate violence, police violence, and state-sanctioned discrimination is not yet a guarantee for many in the LGBTQ and HIV-affected communities. Those within the LGBTQ communities that live at the intersection of other marginalized identities continue to face disproportionate violence and discrimination – justice and equality for LGBTQ communities are innately connected to issues affecting communities of color, immigrant communities, low-income communities, people with disabilities, and any others that face oppression through a history of systemic and structural barriers.

NCAVP's 2014 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 it will be used as a tool to amplify survivors' experiences, provide research for anti-violence campaigns and actions, and advance our national agenda to increase power, safety, and resources for LGBTQ and HIV-affected communities.

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EXECUTIVE SUMMARY

In 2014 overall reports of anti-LGBTQ and HIV-affected hate violence to NCAVP member programs decreased significantly, however the number of homicides and the severity of violence experienced by LGBTQ and HIV-affected communities stayed relatively consistent with 2013. NCAVP's 2014 hate violence report continues to document multi-year trends revealing that anti-LGBTQ and HIV-affected hate violence disproportionately impacts transgender women, LGBTQ and HIV-affected communities of color, transgender people, transgender people of color, LGBTQ youth and young adults, gay men, and low-income LGBTQ survivors. Also consistent with previous years, White gay cisgender¹ men represented the largest group of hate violence survivors and victims in 2014, 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 violence prevention initiatives, strategic responses to violence, research, and accurate reporting of hate violence as it affects LGBTQ and HIV-affected communities.

KEY FINDINGS

Reported incidents

In 2014, reports of anti-LGBTQ and HIV-affected hate violence decreased significantly from 2013. In 2014, NCAVP member programs received 1,359 incidents of hate violence from LGBTQ and HIV-affected survivors. This is a 32.08% decrease from 2013 where NCAVP members received 2,001 such reports. This decrease is not an indication of an actual decrease of bias-based violence against LGBTQ and HIV-affected communities, as NCAVP data does not speak to national prevalence. This decrease can mostly be attributed the sharp decline in reports of violence to the two major reporting NCAVP members, the New York City Anti-violence Project and the Los Angeles LGBT Center. In 2013, a large spike in high-profile anti-LGBTQ incidents occurred in New York City, resulting in regular, visible community action. This visibility likely led to a spike in reporting to the New York City Anti-Violence Project in 2013. The lack of high profile incidents of violence in New York City in 2014 may have contributed to decreased visibility and reporting in 2014. The New York City Anti-Violence Project's Client Services department was also under-staffed for a significant portion of 2014, which limited their capacity to see as many survivors as 2013. For the LA LGBT Center, a decline in outreach and staffing as a result of staff transitions contributed to this decrease in reports of incidents of violence in Los Angeles. This decrease should not be an indication that anti-LGBTQ hate violence is declining. In fact it should be call to action for policymakers, funders, and service providers to increase outreach support, funding, and legislation that encourages reporting of hate violence incidents and promotes safety for LGBTQ and HIV-affected communities.

¹ Cisgender is a term used to identify individuals whose gender identity and gender expression matches the sex they were assigned at birth. NCAVP replaced the term "non-transgender" with "cisgender" in the 2012 report in order for the report language to reflect contemporary language used in the LGBTQ community.

Hate violence homicides

2014 was a deadly year for LGBTQ and HIV-affected communities with 20 documented homicides, an 11.11% increase from the 18 homicides in 2013 and among the highest number of homicides since NCAVP started tracking this information. Deadly violence against people of color, transgender, and gender non-conforming people remains alarmingly high. 80% of all homicide victims in 2014 were people of color, yet LGBTQ and HIV-affected people of color only represented 41% of total survivors and victims. The majority of homicide victims (60%) were Black and African American, 15% of homicide victims were Latin@, and 15% of homicide victims were White. More than half (55%) of victims were transgender women, while 50% of homicide victims were transgender women of color. Transgender survivors and victims only represent 19% of total reports to NCAVP, highlighting a disproportionate impact of homicide against transgender people. 35% of homicide victims were men.

MOST IMPACTED COMMUNITIES

Transgender women survivors were:

- 1.6 times more likely to experience any physical violence
- 2.9 times more likely to experience discrimination
- 1.6 times more likely to experience sexual violence
- 1.9 times more likely to experience threats and intimidation
- 2.4 times more likely to experience harassment
- 5.8 times more likely to experience any police violence
- 1.4 times more likely to experience hate violence in public areas
- 1.3 times more likely to experience hate violence in shelters
- 6.1 times more likely to experience physical police violence

Transgender survivors were:

- 1.7 times more likely to experience discrimination
- 1.5 times more likely to experience threats and intimidation
- 1.5 times more likely to experience harassment
- 4.6 times more likely to experience police violence
- .67 times less likely to report to police
- 6.1 times more likely to experience physical violence from police

Transgender people of color survivors were:

- 1.6 times more likely to experience any physical violence
- 1.7 times more likely to experience discrimination
- 1.8 times more likely to experience sexual violence
- 2.0 times more likely to experience threats and intimidation
- 1.5 times more likely to experience harassment
- 1.9 times more likely to require medical attention
- 3.1 times more likely to experience any police violence
- .59 times less likely to receive a hate violence classification by police
- 1.5 times more likely to experience hate violence in public areas
- 6.2 times more likely to experience police violence

Transgender men survivors were:

- 1.6 times more likely to experience discrimination
- 3.5 times more likely to experience hate violence in shelters

LGBTQ and HIV-affected low income survivors were:

- 1.8 times more likely to experience discrimination
- 1.3 times more likely to experience threats and intimidation
- 2.1 times more likely to experience hate violence at the workplace

LGBTQ and HIV-affected people of color survivors were:

- 2.2 times more likely to experience any physical violence
- 1.4 times more likely to be injured and 1.7 times more likely to require medical attention
- 2.4 times more likely to experience police violence
- .64 times less likely to receive hate violence classification from police
- Asian Pacific Islanders, Middle Eastern, Native American, and other racial identities were 1.46 times more likely to experience discrimination

LGBTQ and HIV-affected Black survivors were:

- 2.0 times more likely to experience any physical violence
- 1.4 times more likely to experience threats and intimidation
- 2.0 times more likely to experience discrimination
- 1.8 times more likely to experience police violence

LGBTQ and HIV-affected Latin@ survivors were:

- 1.5 times more likely to experience discrimination
- 1.2 times more likely to experience hate violence in public
- 1.5 times more likely to experience hate violence at the workplace
- 1.8 times more likely to experience physical violence and 1.5 times more likely to be injured
- 1.7 times more likely to experience police violence

Gay men survivors were:

- 1.4 times more likely to report to the police
- 2.3 times more likely to experience any physical violence
- 1.5 times more likely to experience hate violence in public areas
- 1.8 times more likely to experience injury as a result of hate violence and 1.5 times more likely to require medical attention

Lesbian survivors were:

- 1.8 times more likely to experience sexual violence
- 1.3 times more likely to experience hate violence in the workplace
- 1.4 times more likely to experience hate violence in public

Cisgender women survivors were:

- 1.7 times more likely to experience sexual violence

Women survivors were:

- 2.3 times more likely to experience sexual violence

Men survivors were:

- 1.5 times more likely to experience hate violence on a street or in a public area
- 1.2 times more likely to have their hate violence incidents recorded as such by the police
- 1.7 times more likely to be injured, and 1.6 times more likely to require medical attention
- 1.5 times more likely to report physical violence

Low income survivors were:

- 1.8 times more likely to experience discrimination
- 1.3 times more likely to experience threats and intimidation
- 2.1 times more likely to experience hate violence at the workplace

LGBTQ and HIV-affected youth survivors (up to 24 years of age) were:

- 2.5 times more likely to be injured due to hate violence
- 2.1 times more likely to require medical attention

LGBTQ and HIV-affected young adult (ages 19-29) survivors were:

- 1.8 times more likely to experience physical violence
- 2.1 times more likely to require medical attention
- 2.0 times more likely to be injured
- 2.2 times more likely to experience police violence

Hate violence survivor and victim demographics

In 2014, gay survivors and victims represented the highest percentage of total reports (47.05%). This is consistent with 2013's findings, where gay survivors represented approximately 50% of overall victims and survivors. Lesbian survivors represented 14.27% of survivors in 2014, a decrease from 2013's findings (19%). Heterosexual survivors represented 14.27% of survivors in 2014, consistent with data from 2013.² Bisexual survivors represented 11.82% of survivors in 2014, an increase from 2013 (9%). Men accounted for 38.65% of total hate violence survivors, consistent with 2013 (37%). Women represented the second highest (25.65%) gender identity category in 2014, with a slight increase from 2013 (24%). Transgender survivors represented 18.88% of survivors, a significant increase from 2013 (13%).

Police response

54.20% of survivors reported their incidents to the police, a significant increase from 2013 (45%). 27.36% of survivors reported hostile attitudes from the police in 2014, a decrease from 2013 (32%). Of the survivors who interacted with the police and experienced hostility and police misconduct, 57.38% reported being unjustly arrested by the police, consistent with data from 2013 (55%). Excessive force accounted for 32.79% of police misconduct, which is an increase from 2013 (28%). Entrapment accounted for 9.84% of police misconduct, up from 8% in 2013.

² Within NCAVP's data, "heterosexual" includes multiple identities and most likely represents more transgender people than within heterosexual communities in the United States.

Police classification

In 2014, 6.15% of hate violence incidents reported to the police were classified as bias crimes, a substantial decrease from 2013 (24%).

RECOMMENDATIONS

FOR POLICYMAKERS AND FUNDERS

End the homophobic, transphobic, and biphobic culture that fuels violence.

- Policymakers and funders should support hate violence prevention programs to reduce and end hate violence.
- Policymakers and funders should support public education and awareness campaigns to reduce and end homophobia, biphobia, and transphobia.
- Policymakers and public figures should promote safety for LGBTQ and HIV-affected people by denouncing homophobic, biphobic, and transphobic statements, laws, and programs.
- Policymakers should prohibit offenders of anti-LGBTQ and HIV-affected hate violence from using “Gay and Transgender Panic” defenses and cease the prosecution of LGBTQ individuals for defending themselves against hate violence attacks.
- 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 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.

End root causes and social determinants of anti-LGBTQ and HIV-affected violence through ending poverty and anti-LGBTQ and HIV-affected discrimination.

- Federal, state, and local governments should pass comprehensive non-discrimination laws and enact policies that protect LGBTQ and HIV-affected communities from discrimination based on sexual orientation, gender identity, gender expression, and HIV-status in regards to housing, healthcare, credit, employment, jury service, public accommodation, and access to services.
- 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.
- 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 passing an LGBTQ-inclusive Runaway and Homeless Youth Act, funding trainers familiar to work with these agencies on LGBTQ and HIV-affected cultural competency trainings, and support restorative justice models in schools.
- Policymakers and law enforcement should end policies which profile and police people engaged in survival crimes and support harm reduction services that support people engaged in survival crimes.
- Policymakers and funders should support an LGBTQ and HIV-affected specific research agenda to research policies and programs to address hate violence against LGBTQ and HIV-affected homeless people.

- Policymakers should remove barriers to housing, food assistance, employment, education, and other social safety rights for people with criminal records, many of whom are LGBTQ and HIV-affected.
- Federal and state policymakers should raise the minimum wage to increase low-income and low-wage workers to be able to meet basic needs and increase their safety.
- Federal, state, and local policymakers should enact LGBTQ-inclusive homeless prevention and support programs for homeless youth, a large percentage of whom are LGBTQ identified.

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

- Policymakers and funders should support LGBTQ and HIV-affected anti-violence outreach efforts to reach LGBTQ and HIV-affected survivors of violence.
- Policymakers and funders should support research on effective LGBTQ and HIV-affected hate violence prevention strategies and models.
- 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.
- Federal, state, and local governments should recognize violence against LGBTQ and HIV-affected people, particularly transgender communities of color, as a public health crisis and support initiatives to prevent this violence.
- 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.
- 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.
- Private funders including foundations, corporate donors, and individual donors should fund strategies to support LGBTQ and HIV-affected survivors separate from the criminal legal system including community accountability and transformative justice.
- Public and private funders should fund data collection and research on LGBTQ and HIV-affected communities' experiences of 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.
- Federal, state, and local governments should mandate trainings that increase first responders' and non-LGBTQ and HIV-affected direct service providers' knowledge and competency in serving LGBTQ and HIV-affected survivors of violence.

End police profiling and police violence against LGBTQ and HIV-affected people.

- Federal, state, and local governments should enact polices that prohibit police profiling such as the federal End Racial Profiling Act that includes provisions 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.
- The Centers 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.
- Local law enforcement agencies should prohibit policing protocols and practices that use searches to assign gender for detainees.
- Policymakers should enact policies that address homophobic, transphobic, and biphobic violence within jails, detention centers, and prisons.
- Policymakers should ensure the implementation of the Prison Rape Elimination Act (PREA) in immigration detention centers and expand PREA to grant more rights for incarcerated transgender people.
- 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.
- Federal, state, and local governments should mandate trainings that increase first responders' and non-LGBTQ and HIV-affected direct service providers' knowledge and competency in serving LGBTQ and HIV-affected survivors of violence.

Enact comprehensive, humane, and LGBTQ-inclusive immigration reform.

- Policymakers should reduce the criminalization, detention, and deportation of LGBTQ and HIV-affected immigrants. States and city counties should separate community police work from federal immigration enforcement through limiting programs such as Secure Communities (S-Comm) and policymakers should expand the alternatives-to-detention program throughout the United States.
- Policymakers should strengthen and improve the asylum process for LGBTQ and HIV-affected survivors by:
 - Assigning culturally competent and qualified immigration judges, and improving access to legal counsel for LGBTQ and HIV-affected immigrants.
 - Repealing the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 provisions concerning work authorization filing procedures when asylum seekers request an adjournment, and give those seeking protection in the United States the right to apply for an Employment Authorization Document.
 - Amending the Immigration and Nationality Act (INA) to allow LGBTQ and HIV-affected asylum seekers to simultaneously file an asylum application and an application for work authorization.

Collect data and expand research on LGBTQ and HIV-affected communities overall, particularly data and research on LGBTQ and HIV-affected people's experiences of violence.

- Federal, state, and local governments should collect and analyze data that includes sexual orientation and gender identity, whenever any demographic information is requested, to more effectively analyze data on LGBTQ and HIV-affected hate violence survivors and victims.

- Federal surveys that collect data on incidents of violence, including the FBI's Uniform Crime Report and the United States Department of Justice's National Crime Victimization Survey, should include questions regarding the sexual orientation and gender identity of both survivors and offenders.

INTRODUCTION

The 2014 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 view of the current dynamics of homophobic, biphobic, and transphobic hate violence in the United States. 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 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 crimes within their lifetimes.³ 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., contain no direct questions on sexual orientation or gender identity. 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, which included crimes based on gender identity for the first time in the latest iteration of the report.⁴ The FBI's report documents hate crimes motivated by bias against sexual orientation and gender identity that local law enforcement agencies report to the FBI annually.⁵ Many critics have questioned the validity of this report as the FBI severely underreports the number of hate-crimes annually due to lack of participation from local law-enforcement agencies. In fact, the Bureau of Justice Statistics, another federal agency, estimates that the actual number of hate crimes, nationally,

DEFINITIONS IN THIS REPORT

Cisgender: A term used to describe an individual whose self-perception of their gender identity 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 a person identifies 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, transgender, genderqueer, and/or identifying as gender non-conforming. Gender identity is not static and can change over time.

Gender Non-Conforming: A term that describes a person whose gender expression is different from the societal expectations based on their assigned sex at birth. This term can refer to a person's gender identity or gender role and refers to someone who falls outside or transcends what is considered to be traditional gender norms for their assigned sex.

Heteronormative: A viewpoint that expresses heterosexuality as a given instead of being one of many possibilities for a person's sexual orientation. Heteronormativity is often expressed subtly where heterosexuality is "accepted" as the default sexuality.

(Continued on next page)

³ *Hate Crime Victimization Among Lesbian, Gay, and Bisexual Adults: Prevalence, Psychological Correlates, and Methodological Issues*. Accessed from <http://psychology.ucdavis.edu/rainbow/html/violence> April, 2015.

⁴ "Publication Includes New Data Collected Under Shepard/Byrd Act." FBI. FBI, 08 Dec. 2014. Accessed April, 2015.

⁵ *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> April, 2015.

may be 40 times higher than those reported by the FBI. The FBI reported only 23 hate crimes that had anti-transgender motivation and only 8 such crimes against gender non-conforming people, while, NCAVP in 2013 documented 12 hate violence homicides against transgender women alone. Additionally, while the FBI tracks hate crimes and NCAVP tracks hate violence including incidents that may not be 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.

In January, 2013 the Centers for Disease Control and Prevention (CDC) released a report titled: “The National Intimate Partner Violence and Sexual Violence Survey (NISVS): 2010 findings on Victimization by Sexual Orientation.”⁶ This groundbreaking report is the first nationally representative prevalence estimate of sexual violence, stalking, and intimate partner violence among those who identify as lesbian, gay, or bisexual in the United States. In many instances of stalking, intimate partner violence, and specifically sexual violence against LGBTQ and HIV-affected communities, anti-LGBTQ bias is utilized. In this study, participants were asked to identify their sexual orientation and/or gender identity. Transgender and gender non-conforming people were not represented in the NISVS findings because the sample size was too small and based on self-reporting. This suggests the need for more explicit inclusion of gender identity and expression in future studies; specifically the inclusion of gender identity and sexual orientation in national surveys, like the Department of Justice’s National Crime Victimization Survey, that collect data on hate crimes and hate violence. The study highlights that the lifetime prevalence of rape by any offender against bisexual women was 46.1%, 13.1% for lesbian women, and 17.4% for heterosexual women.⁷ In addition, 1 in 3 bisexual women (36.6%) have experienced stalking victimization during their lifetime.⁸ NCAVP welcomes the increased federal attention on the experiences of LGBTQ and HIV-affected survivors and victims and that federal data collection systems are becoming increasingly more inclusive.

DEFINITIONS IN THIS REPORT

HIV- Affected: A term that describes HIV-positive people, people living with AIDS, partners, friends, lovers, family members, and communities that are impacted by HIV/AIDS.

Intimate Partner Violence (IPV): a pattern of behavior where one intimate partner coerces, dominates, or isolates another intimate partner to maintain power and control over the partner and the relationship.

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.

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 attractions. Sexual orientation is not static and can change 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.

⁶ Centers for Disease Control and Prevention. *The National Intimate Partner and Sexual Violence Survey: 2010 Findings on Victimization by Sexual Orientation*. Accessed from http://www.cdc.gov/violenceprevention/pdf/nisvs_sofindings.pdf April, 2015.

⁷ *Ibid.*

⁸ *Ibid.*

Despite this progress, the lack of comprehensive data about LGBTQ and HIV-affected communities and violence results in policymakers, advocates, practitioners, and LGBTQ and HIV-affected communities having 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 limits LGBTQ and HIV-affected anti-violence programs' ability to measure and evaluate the impact of their programs. Programs experience challenges measuring their impact without this prevalence data because they cannot compare and contrast 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 2014, there is a marked decline in the total number of hate violence incidents reported to NCAVP; from 2,001 incidents in 2013 to 1,359 in 2014 – a 32.08% decrease. This does not necessarily suggest that violence against LGBTQ and HIV-affected people is on the decline, however, as NCAVP's does not collect prevalence data. This decrease can be attributed the sharp decline in reports of violence to the two major reporting NCAVP members, the New York City Anti-Violence Project and Los Angeles LGBT Center. There is no uniform explanation for why this decrease occurred and many factors played a part. In 2013, a large spike in high-profile anti-LGBTQ incidents occurred in New York City, resulting in regular, visible community action. This visibility likely led to a spike in reporting to the New York City Anti-Violence Project in 2013. The lack of high profile incidents of violence in New York City in 2014 may have contributed to decreased visibility and reporting in 2014. The New York City Anti-Violence Project also attributed this decrease to low staffing during 2014. For the LA LGBT Center, a decline in outreach and staffing contributed to this decrease in reports of incidents of violence. This decrease should not be an indication that anti-LGBTQ hate violence is declining. In fact it should be call to action for policymakers, funders, and service providers to increase funding, legislation, and outreach that encourages reporting of hate violence incidents and promotes safety for LGBTQ and HIV-affected communities.

In 2013 NCAVP collected data on the socioeconomic condition of survivors, and the analysis of socioeconomic data is included in this report for the first time in the 2014 report. In 2014, NCAVP increased the amount of variables and person-level analysis compared to previous years and continues to create new analytical categories to understand the intersections of identity and hate violence. The increasing severity of hate violence LGBTQ and HIV-affected communities face only reinforces the need for NCAVP to find new ways to document and analyze hate violence to support critical legislative, policy, and cultural change.

METHODOLOGY

HOW ORGANIZATIONS COLLECTED THE DATA

This report contains data collected in 2014 by NCAVP member programs. Sixteen NCAVP members and ally organizations across fourteen states submitted data to NCAVP. Organizations collected this information from survivors 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 to document hate violence incidents. In 2014, 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 from local organizations and person-level data that gives policy makers, first responders, and LGBTQ and HIV-affected communities a comprehensive depiction of anti-LGBTQ and HIV-affected hate violence. With person-level data, NCAVP can anonymously analyze many facets of incidents of hate violence. 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 with multiple intersecting identities such as LGBTQ and HIV-affected people of color and transgender people of color and the types of violence or police response that they faced.

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 both the aggregate and person-level data analysis. For the aggregate data, NCAVP compared data proportionally for each variable between 2013 and 2014 allowing NCAVP to accurately assess increases or decreases in violence reporting, demographic shifts for survivors, or demographic shifts for offenders across these two years. For the person-level data, NCAVP coded approximately one hundred-fifty variables on 1,359 survivors in order to explore the relationships between various identities and experiences in this report. This is a 32.08% decrease from 2013's person-level data set, which analyzed 2,001 survivors. NCAVP selected statistics for publication based upon their relevance 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.

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 be unaware of their local anti-violence program, people who cannot geographically access anti-

violence programs, people who are not out, people who are uncomfortable with reporting, and people who face other barriers to reporting or accessing services. While the information contained in this report provides a detailed picture of the individual survivors, it cannot and should not be extrapolated to represent the prevalence of hate violence against LGBTQ and HIV-affected communities in the United States. The data and analysis pertains to the sample of survivors that contacted NCAVP member programs and affiliates. 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 2013'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 2013 to 2014, including collecting data on socioeconomic indicators. The slight changes allowed for NCAVP's data analysis between 2013 and 2014 to be more accurate to track, report, and analyze in 2014. When comparable data is not available, NCAVP notes this within the report. In addition, NCAVP has worked to increase reporting from our members and decrease the number of undisclosed responses from survivors. 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 accurate depiction of the experiences of LGBTQ and HIV-affected survivors of hate violence.

CONTRIBUTORS

PERSON LEVEL AND AGGREGATE DATA

- Buckeye Region Anti-Violence Organization (BRAVO) (Columbus, OH)
- Center on Halsted (Chicago, IL)
- Community United Against Violence (CUAV) (San Francisco, CA)
- Equality Michigan (Detroit, MI)
- Fenway Health Violence Recovery Program (Boston, MA)
- Los Angeles LGBT Center (Los Angeles, CA)
- New York City Anti-Violence Project (NYC AVP) (New York, NY)
- SafeSpace Program @ the Pride Center of Vermont (Burlington, VT)
- Survivors Organizing for Liberation (SOL - formerly the Colorado Anti-Violence Program) (Denver, CO)
- Trans Pride Initiative (Dallas, TX)
- Western New York Anti-Violence Project (Buffalo, NY)

AGGREGATE DATA ONLY

- Kansas City Anti-Violence Project (KCAVP) (Kansas City, MO; data reflects reports from Kansas and Missouri)
- Montrose Center (Houston, TX)
- OutFront Minnesota (Minneapolis, MN)
- Wingspan Anti-Violence Programs (Tucson, AZ)
- Virginia Anti-Violence Project (Richmond, VA)

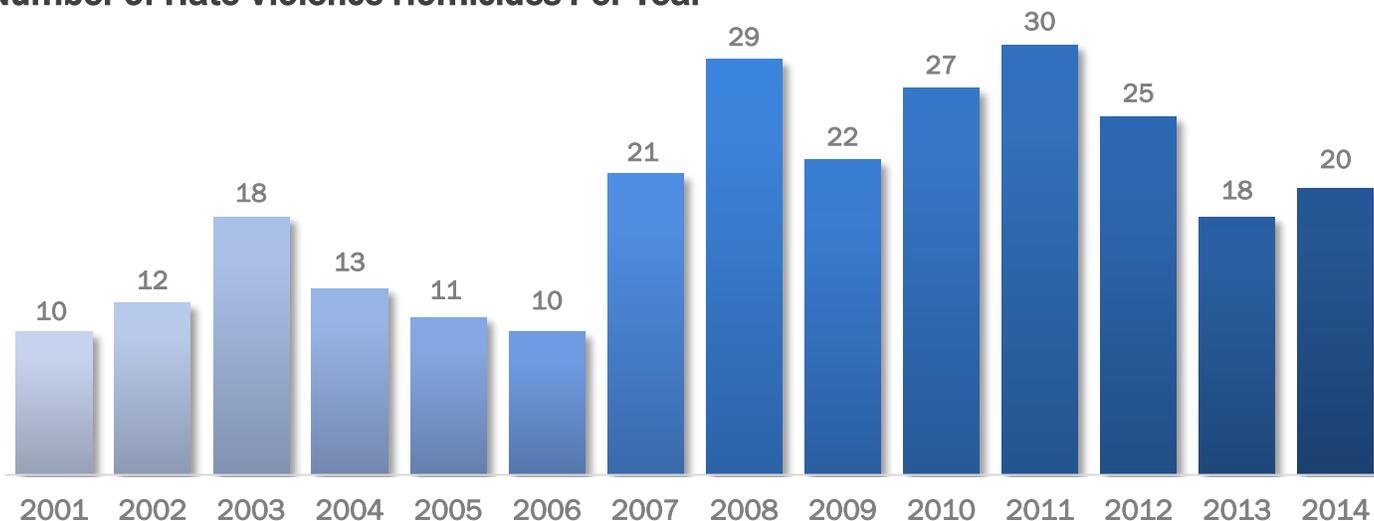
FINDINGS

NCAVP's 2014 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 survivors' 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.

HATE VIOLENCE HOMICIDES

NCAVP documented a slight increase in homicides in 2014 and the severity of fatal violence against people of color, transgender women, and gender non-conforming LGBTQ and HIV-affected people remains alarmingly high and suggests these communities are at highest risk of homicide.

Number of Hate Violence Homicides Per Year



HATE VIOLENCE HOMICIDE DEMOGRAPHICS

In 2014 NCAVP documented 20 anti-LGBTQ and HIV-affected homicides. This is an 11.11% increase from 2013 (18 in 2012 to 20 in 2014) and remains among the highest ever recorded by NCAVP. Severe violence against people of color, transgender women, and gender non-conforming LGBTQ and HIV-affected people remains alarmingly high. 80.00% of all homicide victims in 2014 were people of color, yet LGBTQ and HIV-affected people of color only represented 40.09% of total survivors and victims in 2014. The overwhelming majority of homicide victims were Black and African American (60.00%), and 15.00% of victims were Latin@. More than half (55.00%) of the homicide victims were transgender women, all of whom were transgender women of color, yet transgender survivors and victims only represent 18.88% of total reports to NCAVP. 35% of homicide victims were men, five of whom identified as gay and two of whom identified as bisexual.

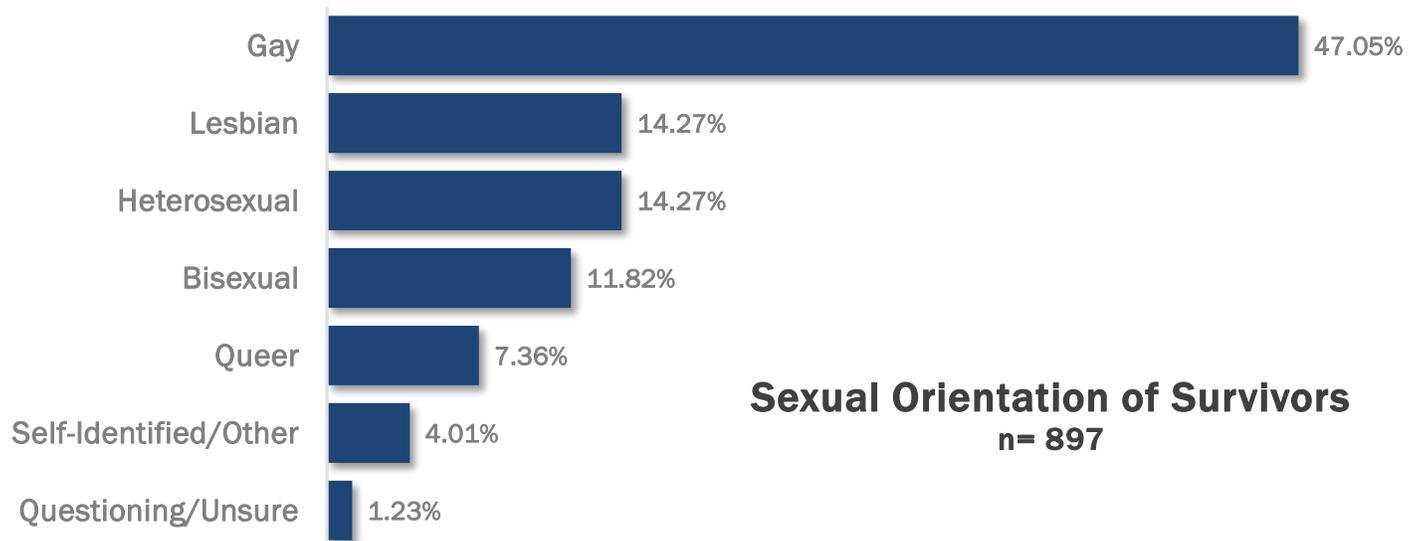
This data continues a four year trend in which transgender women, LGBTQ and HIV-affected people of color, and transgender people of color experienced a greater risk of homicide than other LGBTQ and HIV-affected people. These statistics demonstrate that the most marginalized LGBTQ and HIV-affected communities experience higher rates of severe violence. These same communities experience higher rates of homelessness, poverty, and job discrimination which can increase their risk of violence.⁹

⁹ Sears, Brad, and Lee Badgett. "Beyond Stereotypes: Poverty in the LGBT Community." Williams Institute. TIDES | Momentum. Accessed May, 2015.

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 2014. 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 2014.

SEXUAL ORIENTATION



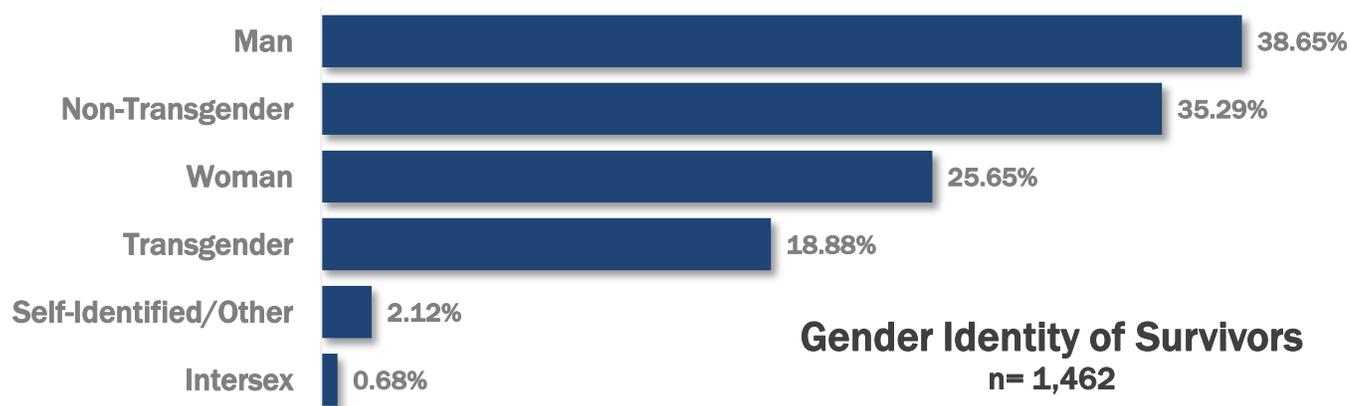
In 2014, gay survivors and victims represented the highest percentage of total reports (47.05%). This is consistent with 2013's findings, where gay survivors and victims represented 50.43% of overall victims and survivors. Lesbian survivors represented 14.27% of survivors and victims in 2014, a decrease from 2013's findings (18.76%). Heterosexual people represented 14.27% of survivors and victims in 2014, a small decrease from 14.49% in 2013.¹⁰ Bisexual survivors represented 11.82% of survivors and victims in 2014, an increase from 2013 (8.95%). Queer survivors and victims represented 7.36% of survivors and victims in 2014, a notable increase from 2013 where queer survivors accounted for only 2.98% of reports to NCAVP. Self-Identified/Other survivors and victims represented 3.24% of survivors and victims in 2014, a slight increase from 2012 (3.05%). NCAVP members believe that the large number of gay survivors and victims may result from the historical relationship many member programs have with gay cisgender men communities. 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." NCAVP data collection and analysis takes into account the fluidity of terminology used by LGBTQ and HIV-affected survivors of

¹⁰ Within NCAVP's data, "heterosexual" includes multiple identities and most likely represents more transgender people than within heterosexual communities in the United States.

violence and strives to be inclusive of all identities. NCAVP member programs serve diverse and unique communities; targeted outreach or community specific programming is likely to affect the types of survivors that each program serves. However, gay survivors are the most common reporting survivors in the majority of NCAVP programs.

GENDER IDENTITY



In 2014, 38.65% of total hate violence survivors and victims identified as men, a slight increase from 2013 when 37.13% of survivors identified as men. Women represented the second highest (25.65%) gender identity category in 2014, also a slight increase from 2013 (23.57%), but consistent with data from previous years. Transgender identified survivors and victims represented 18.88%, a significant increase from 2013 (13.14%). Although the increase in the number of transgender survivors may seem significant, it should be taken into account that the overall number of survivors decreased this year, therefore this increase is only in the proportion of transgender survivors in context of the overall sample size. The proportion of survivors that were self-identified or “other” (2.12%) and intersex (0.68%) remain the lowest reported categories in 2014, continuing the trend that has been observed in previous years.

Cisgender survivors and victims represent 35.29% of survivors and victims and account for a large proportion 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 percentage of survivors who identify as cisgender is actually deflated, as most cisgender individuals rarely encounter circumstances where they need to identify their cisgender identity and therefore might not indicate this on NCAVP intake and data collection documents. Transgender communities, however, face a multitude of barriers when seeking support after experiencing hate violence, and yet account for 18.88% of total survivors. The proportion of transgender survivors reporting to NCAVP is much higher than the proportion of transgender individuals in the U.S. population (by some estimates, there are close to a million transgender individuals in the U.S.); this reflects the disproportionate impact of violence on transgender communities. Some NCAVP programs are designing specific programs to address violence against transgender communities. Programs such as Tran Pride Initiative in Dallas, BreakOut! in New Orleans, the New York City Anti-Violence Project, and the Los Angeles LGBT Center have programs to specifically serve transgender survivors which could increase NCAVP’s ability to collect reports from these communities.

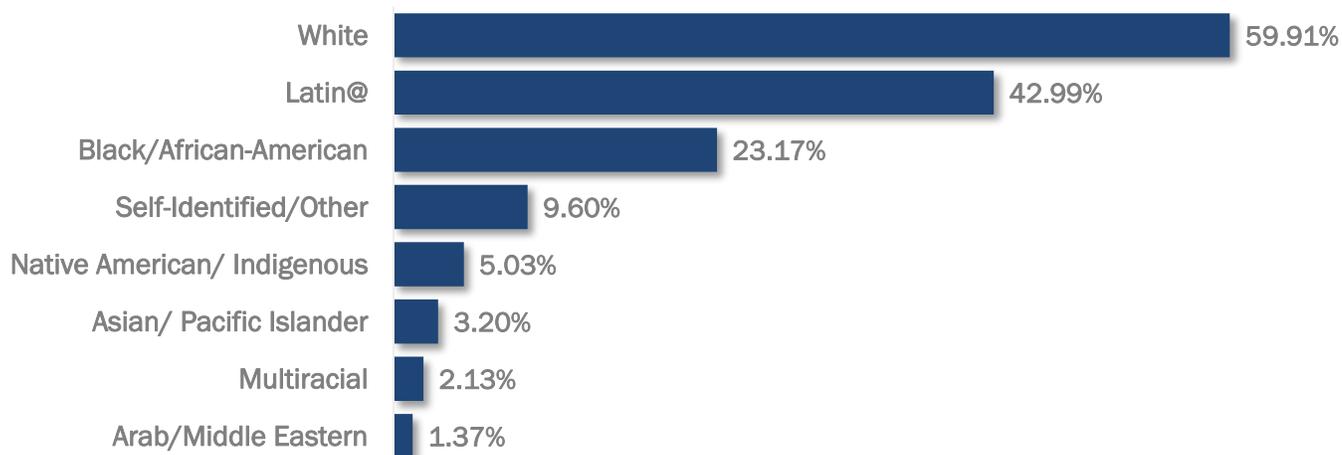
RACIAL AND ETHNIC IDENTITY

White survivors and victims remained the largest single proportion of survivors and victims in 2014 (59.91%), a notable increase from 2013 (41.12%). Several NCAVP programs reported increases in the number of White survivors in proportion to survivors who identify as people of color. While there is no single explanation to why NCAVP programs saw such a large increase in the proportion of White survivors in 2014, it may be attributed to the large decrease in the number of overall survivors reporting to NCAVP programs. As mentioned previously and noted in previous reports, White survivors are consistently the largest racial group that reports to NCAVP programs. Since most NCAVP reporting member programs saw significant decreases in number of survivors reporting, due to decreases in capacity, turnover in staff, closure of programs, and lack of outreach, this decrease has come at the expense of the number of people of color reporting to NCAVP in 2014.

Latin@ survivors and victims represented 42.99% of overall survivors and victims, the second highest group, which is a large increase from 2013 (28.50%). Black and African American survivors and victims represented the third highest group of survivors, making up 23.17% of total survivors and victims, which is a significant increase from 2013 (18.09%). Asian and Pacific Islander (3.20%) and multiracial (2.13%) survivors and victims remained consistent with previous years. Native American survivors and victims made up 5.03% of overall survivors and victims, a significant increase from 2013 (1.40%). Arab and Middle Eastern survivors and victims represented 1.37% of the total, another small increase from 2013 (0.33%). Self-Identified/Other survivors and victims made up 9.60% of total survivors and victims, nearly doubled from 2013(4.87%).¹¹ The low rates of reporting for Native American, Asian Pacific-Islander, and South Asian survivors means that meaningful data analysis cannot be conducted on experiences of hate violence among these communities, and underscores the need for targeted outreach.

Racial and Ethnic Identity of Survivors

n= 834



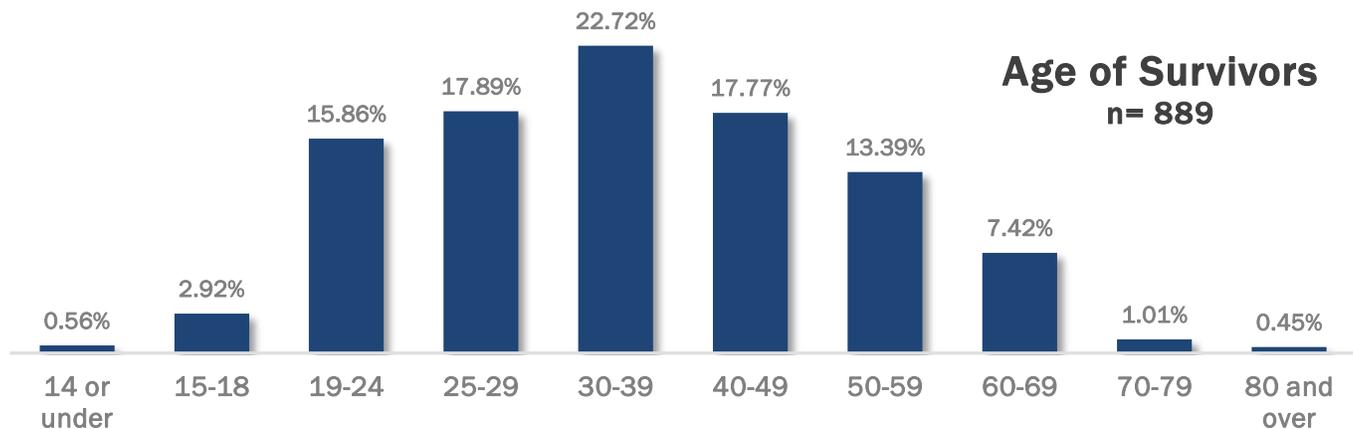
¹¹ NCAVP members document the racial identities that survivors disclose to them, therefore survivors and victims can select multiple racial identities.

When the different racial categories are combined they make up more than 100% (147.40%), as NCAVP member programs allow survivors to check multiple racial and ethnic identities in intake and data collection forms. While survivors can identify themselves as multiracial or “other” in data collection forms, many choose to mark several racial identities that they may identify with. While it is not possible to ascertain how many survivors identified with multiple racial categories, due to the nature of data submitted to NCAVP by member programs, the high total percentage makes it evident that many survivors reporting to NCAVP in 2014 identified as multi-racial.

In the previous several years, White survivors and victims were underrepresented within NCAVP’s reports. People who identify as White (non-Hispanic or Latin@) accounted for 63% of the general population within the United States in 2012, but they made up only 41.12% of NCAVP’s survivors and victims in 2013.¹² However, in 2014 the number of White survivors actually increased to be more reflective of the overall population of the United States. Latin@ survivors are overrepresented within NCAVP’s reports, representing almost 17% of the population in the U.S., yet 42.99% of survivors reporting hate violence incidents to NCAVP in 2014. The number of Black and African American survivors are also overrepresented when compared with the overall population, representing approximately 13% of the general population and making up 23.17% of reports in 2014. The number of Asian/Pacific Islander and Native American survivors and victims who report to NCAVP closely mirror the general population of the United States.

To some degree, the overrepresentation of people of color in NCAVP’s reporting population may be explained by the location of reporting member programs in urban areas and states with significantly higher numbers of immigrant communities and communities of color. This report contains data from states known for high Latin@ populations such as: Arizona, California, Colorado, Illinois, New York, and Texas. Many programs also reside in regions with high populations of Black and African American people. These numbers demonstrate NCAVP’s member programs’ outreach efforts within LGBTQ and HIV-affected communities of color. For example, NCAVP member organization CUAV in San Francisco, California does extensive outreach to low-income communities of color, and in 2014 more than 60% of the survivors and victims who reported to CUAV identified as Latin@ or Black. In addition to outreach and programming from NCAVP members, these figures also reinforce that LGBTQ and HIV-affected people of color are at higher risk for violence.

¹² U.S. Census Bureau. “*State & county Quick facts: Data derived from Population Estimates, American Community Survey*” (2012, January 12). Accessed from <http://quickfacts.census.gov> in April, 2015.



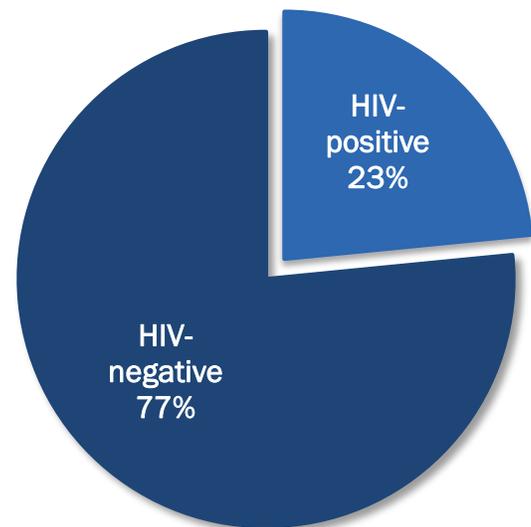
AGE

Age of survivors is one of the few demographic categories that remains quite consistent in terms of trends, year after year, with survivors between the ages of 19-29 always representing the highest number of reports to NCAVP. Survivors and victims between the ages of 19-29 represented 33.75% of overall hate violence survivors and victims in 2014, a slight decrease from 2013 (36.36%). Survivors and victim between the ages of 30-39 represented 22.72% of reports, a slight increase from 2012 (21.15%). Ages 40-49 made up 17.77% of reports, a decrease from 2013 (20.13%). Ages 50-59 represented 13.39% of reports, a slight increase from 2013 (10.10%). Ages 15-18 represented 2.92% of reports, a significant decrease from 2013 (10.10%). Ages 60 and above continue to be the least represented age group (8.88%) accounting for less than 10% of total survivors in 2014 which although slightly higher than 2013 (4.41%) is still relatively consistent as the least represented age category for survivors reporting to NCAVP. The large representation of reports from ages 19-29 may result from several factors. LGBTQ and HIV-affected youth and young adults may be more at risk of violence. LGBTQ and HIV-affected youth and young adults may face increased risk of other social determinants such as family rejection, homelessness, and poverty which can place them at risk of violence. Additionally, a number of NCAVP member programs have programming and outreach directly targeted to youth and young adults including the BSEEDZ youth organizing project of Survivors Organizing for Liberation (formerly the Colorado Anti-Violence Program) and youth specific programming at the Los Angeles LGBT Center. NCAVP's member program in Houston, the Montrose Center, also established partnerships with local schools which account for an increase in the population of youth (15-18) survivors of hate violence. NCAVP is also consistently increasing the number of elder survivors (ages 60 and above) each year although older survivors of hate violence are still largely underrepresented in NCAVP statistics.

HIV STATUS

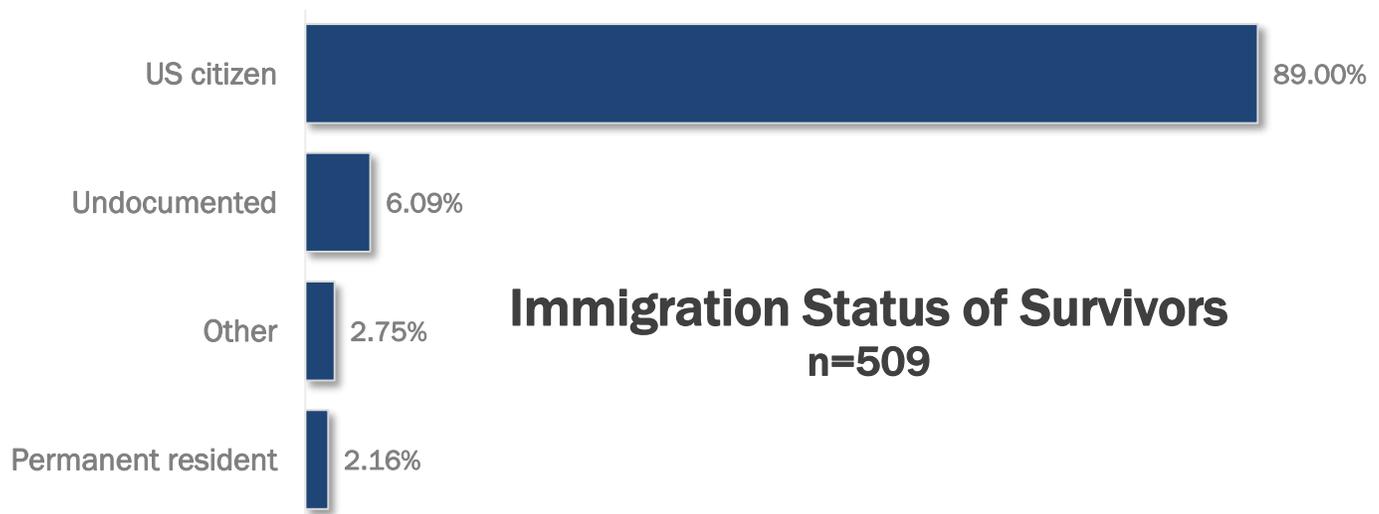
Of the survivors and victims who disclosed their HIV status in 2014, 23.45% were HIV-positive, a notable decrease from 2013 (32.17%). The number of HIV-negative survivors increased in relation to 2013. Despite a decrease from 2013, the proportion of HIV-positive survivors compared to the general population remains high. This may suggest an increased risk of violence for HIV-affected people as well as a high number of HIV-affected survivors and victims feeling safe to report to NCAVP member organizations. This interpretation is reinforced as the number of people disclosing HIV status to NCAVP (both positive and negative) increased by almost 50%, while the overall number of survivors decreased significantly. Many NCAVP member programs have outreach initiatives that focus on HIV-affected communities, which can also lead to a high proportion of HIV-affected community members reporting hate violence. It is important to highlight the disproportionate impact HIV has on the LGBTQ and HIV-affected community. In 2010, gay and bisexual men accounted for 63% of estimated new HIV infections in the United States and 78% of infections among all newly infected men. From 2008 to 2010, new HIV infections increased 22% among young (aged 13-24) gay and bisexual men and 12% among gay and bisexual men overall. These rates of infection are much higher for Black and Latin@ men who have sex with men (MSM). While the percentage of people who were HIV-positive was much higher in NCAVP's sample than the percentage nationwide, a low number of survivors and victims (563) provided this information to NCAVP. This could be due to the sensitive nature of discussing HIV-status and may mean that these statistics may not be fully reflective of the experiences of all the survivors and victims that NCAVP served.

HIV Status of Survivors
n= 563



IMMIGRATION STATUS

89.00% of survivors in 2014 were US citizens, which increased slightly from 2013 (85.83%) but remains consistently the most common response by survivors through the years. Permanent residents and those whose citizenship status is described by the “other category” together represent less than 10% of total survivors and remains consistent with 2013 data. Undocumented survivors accounted for 6.09% of survivors in 2014, down slightly from 2013 when 7.96% of survivors were undocumented immigrants. According to recent research, there are approximately 267,000 LGBTQ undocumented immigrants in the U.S.¹³ The significant number of undocumented survivors and victims in 2014 may reflect the increased visibility of immigration issues in national discourses, and more targeted outreach to immigrant communities from NCAVP members. The increased visibility of immigration causes and undocumented individuals, programs that specifically address the needs of undocumented victims of violence such as U-Visas, and efforts by NCAVP member programs to reach out to undocumented communities may have led to a larger number of undocumented survivors seeking services and assistance.



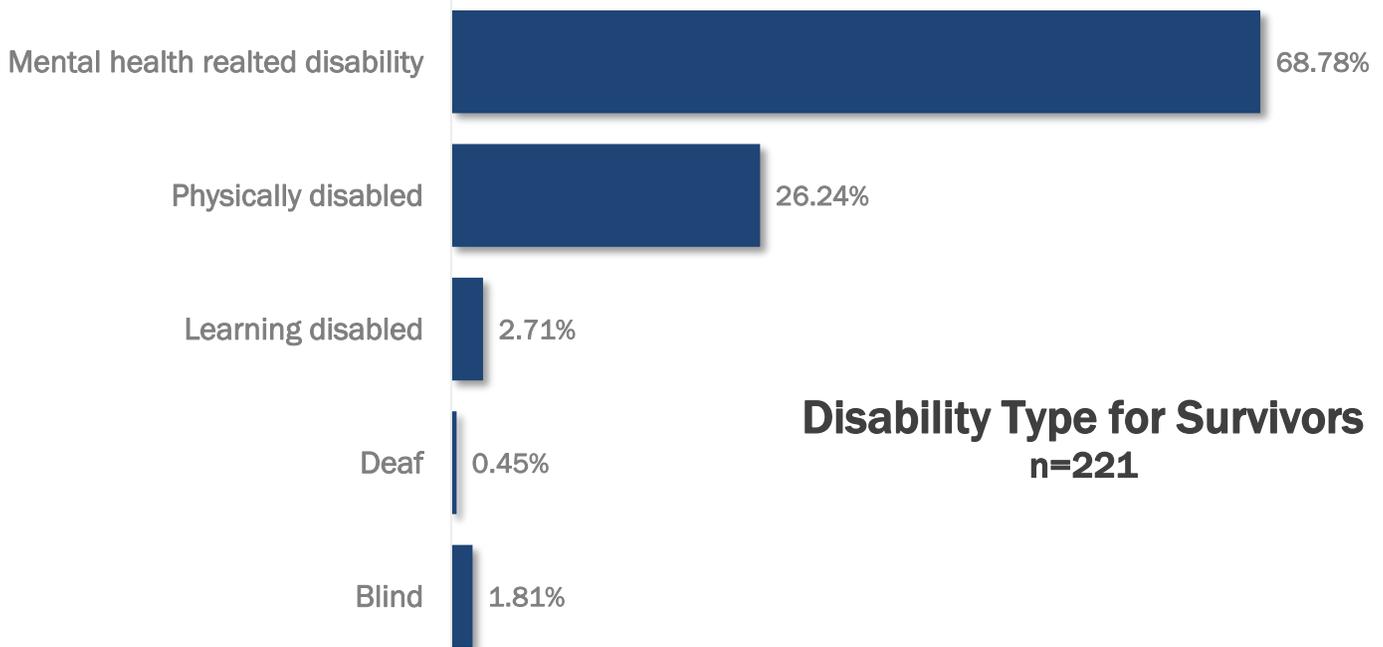
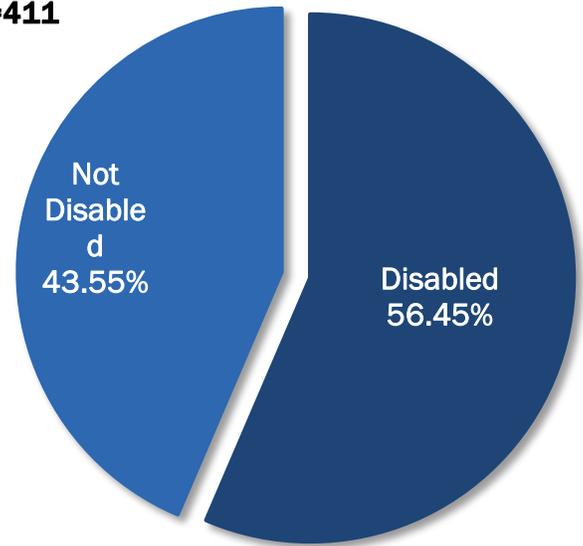
While NCAVP published person-level data on undocumented immigrant survivors in 2013, none of these statistics were significant in 2014. However, violence and xenophobia against undocumented communities continued in 2014, impacting LGBTQ and HIV-affected immigrants in disproportionate ways. While President Obama's Executive Order on Immigration provided some gains for undocumented communities, the struggle for greater protections and a humane immigration policy remains a high-priority for many in the LGBTQ and HIV-affected communities.

¹³ Gates, *op.cit.*

PEOPLE WITH DISABILITIES

In 2014 56.45% of survivors and victims reported having a disability, compared to 31.62% in 2013. Of those who reported having a disability, 68.78% of survivors and victims reported having a disability associated with their mental health, 26.24% of survivors and victims reported having a physical disability, 2.71% of survivors and victims reported having a learning disability, 1.81% of survivors reported being blind and 0.45% of survivors reported being Deaf. These proportions remain relatively consistent with data from 2013. 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 an incident of 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 needs of LGBTQ and HIV-affected survivors and victims with disabilities.

Disability Status of Survivors
n=411



Disability Type for Survivors
n=221

MOST IMPACTED IDENTITIES

NCAVP's person-level data allows us to highlight the identities that are most impacted by different types of hate violence. Similar to findings for 2013, this year's data suggests that LGBTQ and HIV-affected people of color, LGBTQ youth and young adults, transgender people, transgender women, transgender people of color, and low income survivors experience more severe and deadly forms of violence while simultaneously having less access to anti-violence services and support. The data also shows that different marginalized communities face various forms of hate violence in unique ways. For example, gay men were more likely to experience physical forms of hate violence while women were more likely to experience sexual violence and discrimination. The person-level findings below help to describe the ways in which these identities are specifically impacted by hate violence in order to assist policymakers and practitioners to craft targeted programs, campaigns, policies, and legislation to address this violence.

GENDER IDENTITY

Transgender women survivors of hate violence were more likely to experience police violence, physical violence, discrimination, harassment, sexual violence, threats, and intimidation. Transgender women were more likely to experience hate violence in shelters and in public areas. Much of the violence impacting transgender survivors and victims overall also impacted transgender women to similar or heightened degrees, as transgender women experience hate violence that is oftentimes based on both transphobia and sexism. The severity of violence reported by transgender women in 2014, compounded by the high proportion of transgender women homicide victims, suggests that transgender women face an alarming vulnerability to hate violence. Transgender women were 5.8 times more likely to experience police violence compared to overall survivors and 6.1 times more likely to experience physical violence when interacting with the police compared to overall survivors. Additionally, transgender women were 1.6 times more likely to experience physical hate violence, 2.9 times more likely to experience discrimination, 2.4 times more likely to experience harassment, and 1.9 times more likely to experience threats and intimidation compared to overall survivors. Transgender women were 1.6 times more likely to experience sexual violence when compared with other survivors. In addition, transgender survivors were 1.4 times more likely to experience hate violence in public areas and 1.3 times more likely to experience hate violence in shelters. These statistics demonstrate the severely pervasive violence and harassment that transgender women face from both the police and overall society, in many settings. These findings suggest a need for targeted interventions and violence prevention focused on transgender women, and strategies to address and prevent transphobic law enforcement violence.

Transgender survivors were more likely to experience police violence and physical violence from law enforcement. Transgender survivors were more likely to experience discrimination, harassment, and threats as a form of hate violence. The breadth and severity of violence reported by transgender people in 2014 highlights the specific vulnerability of transgender communities to severe violence. Transgender people were 4.6 times more likely to experience police violence compared to cisgender survivors and victims. Transgender people were 6.1 times more likely to experience physical violence when interacting with the police compared to cisgender survivors and victims. Transgender communities' experiences of discriminatory and

violent policing can be a barrier to accessing critical support in the aftermath of violence, placing transgender people at greater risk when they do experience violence. Additionally, this data suggests that transgender people are experiencing hate violence directly from the police, who are charged with protecting people. Transgender survivors were 1.7 times more likely to experience discrimination, 1.5 times more likely to experience harassment, and 1.5 times more likely to experience threats and intimidation compared to overall survivors. Discrimination, harassment, threats, and intimidation can often be connected and can impact the mental health, access to services, access to housing, and access to employment for transgender communities. These factors in turn can create a vicious cycle by increasing the risk for additional forms of violence. This data highlights that transgender people are disproportionately impacted by multiple forms of violence and discrimination, some of which reinforce each other. NCAVP will continue to examine these dynamics in addition to researching specific programs to address the severity of transphobic violence.

Transgender men were also more likely to experience discrimination and hate violence in shelters. This is the second year that NCAVP was able to report on the impact of hate violence on transgender men. 2014 data shows that transgender men were 3.5 times more likely to be the target of hate violence in shelters when compared with other survivors and 1.6 times more likely to experience discrimination. This suggests that transgender men face severe violence, and violence within systems designed to provide social support. These findings highlight that shelters may be extremely dangerous for transgender men.

Men were more likely to receive a hate crime classification. Survivors who identified as men were 1.2 times more likely to receive a hate crime classification by the police. Men are far more likely to have favorable interactions with law enforcement than other communities. Men, especially White cisgender men who represent a plurality of hate violence incidents reported to NCAVP, may historically have greater access to services and police reporting than other LGBTQ and HIV-affected survivors and victims.

Men were more likely to experience physical violence, injury, and require medical attention. Men were 1.5 times more likely to experience physical hate violence when compared with other survivors. Men were 1.6 times more likely to require medical attention compared to survivors and victims who did not identify as men. Men were 1.7 times more likely to experience injury compared to other survivors and victims. Physical violence is likely to result in injuries and require medical attention. Disproportionate experiences of physical violence, injury and needed medical attention highlight the need for first responders to be LGBTQ and HIV-affected culturally competent to ensure that the specific needs of men survivors and victims are met.

Women survivors were more likely to experience sexual violence. This is the second year that NCAVP has published data for cisgender women, as the severity of violence faced by transgender women, which has been highlighted earlier, skewed the results of any statistical analysis done on women as an inclusive category. Cisgender women were 1.7 times more likely to experience sexual violence than survivors who did not identify as cisgender women. All survivors who identified as women, including transgender women, were 2.3 times more likely to experience sexual violence. This data suggests that all survivors that identify as women are particularly vulnerable to sexual violence.

SEXUAL ORIENTATION

Gay men survivors were more likely to report to the police, experience physical violence, more likely to experience violence in public areas, more likely to experience injury, and more likely to require medical attention. Gay men survivors were 2.3 times more likely to experience physical violence. Societal constructions of masculinity may lead to men, specifically gay men, being more at risk of physical altercations and violence. The increased risk of physical violence against gay men places gay men at higher risk of injury. Gay men were 1.8 times more likely to experience injury as a result of hate violence and 1.5 times more likely to require medical attention. Gay men were also 1.5 times more likely to experience violence in public areas, which suggests that gay men may be at particular risk of violence when in public spaces.

Lesbian survivors were more likely to experience sexual violence, and more likely to experience violence in the workplace and in public areas. Lesbian survivors were 1.8 times more likely to experience sexual violence. Lesbian survivors were 1.3 times more likely to experience hate violence in public areas, and 1.4 times more likely to experience violence in the workplace. Lesbian survivors may experience disproportionate forms of hate violence due to the intersections of sexism and anti-LGBTQ bias. Women continue, on average to be paid less than men, and working mothers face heightened scrutiny associated with competing demands of home and work, which may contribute to lesbian women's increased risk of experiencing violence in the workplace. Women also experience higher rates of public sexual harassment due to sexist attitudes towards women, and sexual violence has long been associated with a form of violence used against women to enforce gender roles and men's dominance over women. These findings highlight the unique needs of lesbian survivors, and implications for specific prevention and intervention strategies targeted at lesbian women.

Bisexual survivors were more likely to experience sexual violence and threats and intimidation. Bisexual survivors were 2.1 times more likely to experience sexual violence when compared with other survivors. This data from 2014 aligns with the National Intimate Partner and Sexual Violence Survey (NISVS) conducted by the CDC in 2010 and published in 2013 which found that bisexual people had disproportionately higher rates of lifetime sexual assault and rape than people who did not identify as bisexual. Bisexual women in particular had the highest lifetime prevalence of sexual assault and rape as compared to any other identity. Additionally, bisexual survivors were 1.6 times more likely to experience threats and intimidation as a form of hate violence.

LGBTQ AND HIV-AFFECTED PEOPLE OF COLOR

Transgender people of color were more likely to experience police violence, physical violence, sexual violence, violence in public areas, discrimination, threats and intimidation, harassment, and were more likely to require medical attention as a result of hate violence. Transgender people of color faced multiple disproportionate experiences of violence. Transgender people of color were 3.1 times more likely to experience any form of police violence when compared to other survivors and victims, and were less likely to report incidents of hate violence to the police. Transgender people of color were 1.7 times as likely to experience discrimination, 2.0 times more likely to experience threats and intimidation, 1.5 times more likely to experience harassment, and 1.6 times more likely to experience physical violence compared to other survivors and victims. In addition, transgender people of color were 1.5 times more likely to experience hate violence in public areas.

Transgender people of color survivors were also 1.9 times more likely to require medical attention as a result of hate violence. 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 direct service providers and law enforcement. 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 experience physical violence and police violence. LGBTQ and HIV-affected people of color were more likely to be injured and require medical attention as a result of hate violence. LGBTQ and HIV-affected people of color survivors of hate violence were 2.4 times more likely to experience police violence. LGBTQ and HIV-affected people of color were 2.2 times as likely to experience physical violence compared to White LGBTQ and HIV-affected survivors. LGBTQ and HIV-affected people of color were also 1.4 times more likely to be injured and 1.7 times more likely to require medical attention as a result of hate violence when compared with other survivors. These numbers highlight the severe impact of violence that LGBTQ and HIV-affected people of color experience. In addition, 2014 data shows that LGBTQ and HIV-affected Asian/Pacific Islanders, Native Americans, and Arab/ Middle Eastern survivors were 1.6 times more likely to experience discrimination.

Black survivors were more likely to experience police violence, physical violence, threats and intimidation, and discrimination. The experience of hate violence for Black LGBTQ and HIV-affected survivors lies at the intersection of racism, homophobia, transphobia, and biphobia. Black LGBTQ and HIV-affected individuals, similar to other people of color communities, not only face homophobia, biphobia, and transphobia from members of their own communities and society at large, but also face structural and interpersonal racism that exacerbates their experiences of hate violence. The data analysis shows that Black survivors were 2.0 times more likely to experience any physical violence, 2.0 times more likely to experience discrimination, and 1.4 times more likely to experience threats and intimidation during incidents of hate violence. The experience of Black LGBTQ and HIV-affected survivors of hate violence may be connected to the historical oppression of Black communities in the United States through slavery, racial segregation, Jim Crow laws, and the high rates of police profiling and incarceration of Black communities. This oppression has continued and is demonstrated by the current levels of poverty, police brutality, unemployment, and rampant discrimination faced by Black communities. 2014 data shows that Black LGBTQ survivors were 1.3 times more likely to experience police violence. The experience of hate violence, therefore, is disproportionately impactful for LGBTQ and HIV affected Black individuals.

Latin@ survivors were more likely to experience discrimination and police violence and were more likely to be injured, experience physical violence, and experience hate violence at the workplace. Xenophobia and anti-immigrant bias likely play a role in the experience of bias against Latin@ survivors of hate violence. Latin@ survivors were 1.7 times more likely to experience police violence. Latin@ survivors were also 1.5 times more likely to experience discrimination as a form of hate violence when compared to other survivors. Latin@ survivors were 1.5 times more likely to be injured due to incidents of hate violence and 1.8 times more likely to experience physical violence, suggesting that Latin@ LGBTQ and HIV-affected survivors are disproportionately impacted by hate violence. Latin@ survivors were also 1.5 times more likely to

experience violence at the workplace when compared with other survivors, another indication of the intersections of racism and anti-LGBTQ bias.

LGBTQ AND HIV-AFFECTED LOW-INCOME PEOPLE

Low-income LGBTQ and HIV-affected survivors of hate violence were more likely to experience discrimination, threats and intimidation, and hate violence incidents at the workplace. In 2014, NCAVP was able to analyze income data for LGBTQ and HIV-affected survivors of hate violence for the first time. Low-income (income below \$20,000 a year) LGBTQ survivors faced unique experiences of violence in 2014. LGBTQ and HIV-affected low-income survivors were 1.8 times more likely to experience discrimination, 1.3 times more likely to experience threats and intimidation, and 2.1 times more likely to experience hate violence incidents in the workplace when compared to other survivors.

AGE

Young (up to 24 years of age) LGBTQ and HIV-affected survivors of hate violence were more likely to be injured and require medical attention as a result of hate violence. Young LGBTQ and HIV-affected survivors of violence were 2.5 times more likely to be injured as a result of hate violence and 2.1 times more likely to require medical attention. This data suggests that young LGBTQ and HIV-affected survivors are disproportionately impacted by severe forms of hate violence.

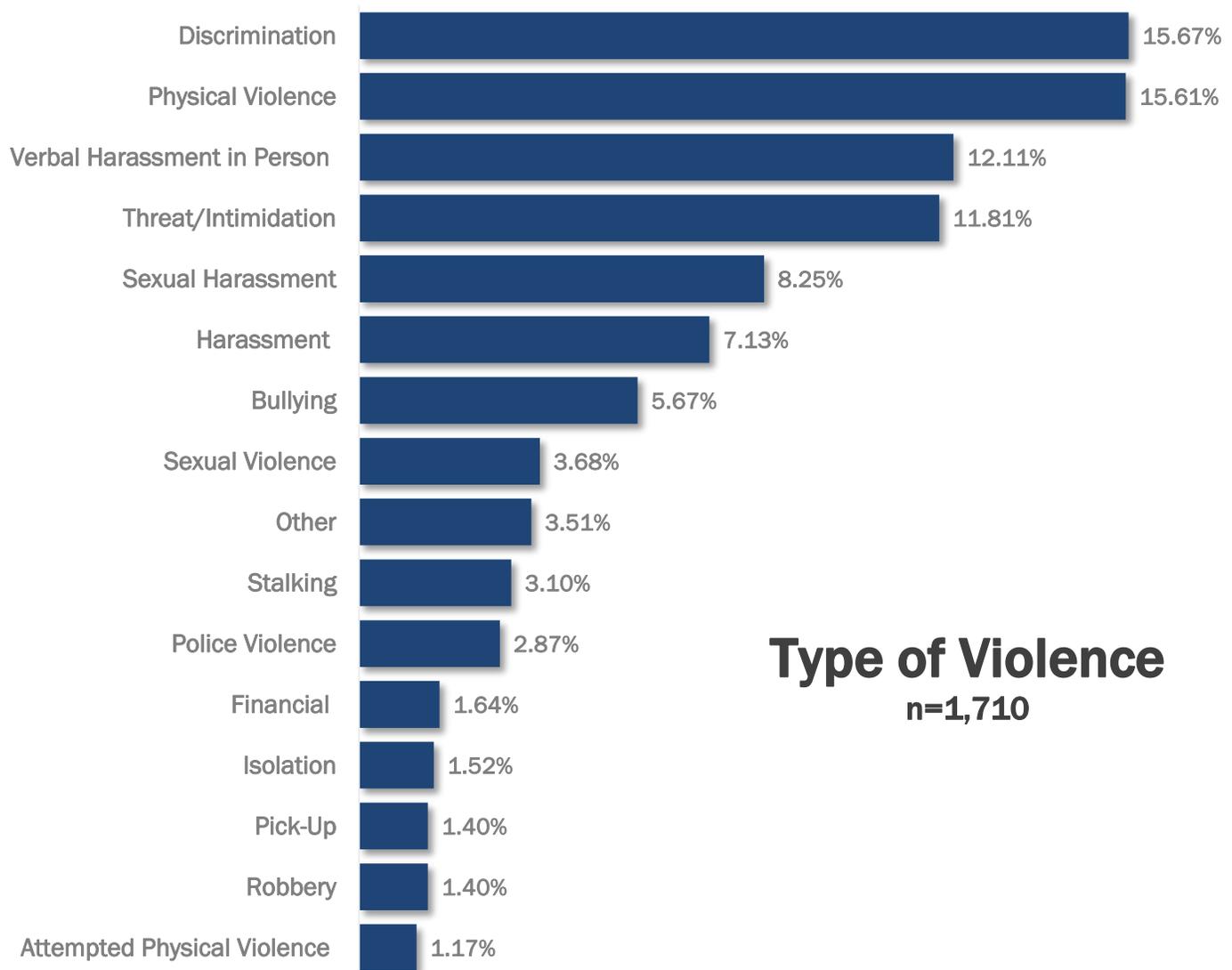
Young adult (ages 19-29) LGBTQ and HIV-affected survivors of hate violence were more likely to experience physical violence, and police violence. Young adult survivors were more likely to be injured and require medical attention as a result of hate violence. Young adult survivors were 1.8 times more likely to experience physical violence, 2.0 times more likely to be injured, and 2.1 times more likely to require medical attention. This data suggests that younger LGBTQ and HIV-affected survivors, below the age of 29, are more likely to be the targets of more physical and severe forms of hate violence. Young adult survivors were also 2.2 times more likely to experience police violence. LGBTQ and HIV-affected communities have historically been criminalized by law enforcement and research suggests that young people are more likely to experience police violence.¹⁴ These intersecting identities may place LGBTQ and HIV-affected young adults at a higher risk of police violence.

14 Nolan, James J., III, Carson Mencken, and Jack McDevitt. "NIBRS Hate Crimes 1995-2000: Juvenile Victims and Offenders." 1995. Accessed in May, 2015.

TRENDS

IN ANTI-LGBTQ AND HIV-AFFECTED HATE VIOLENCE

This section provides data and analysis on the dynamics of relationships between survivors and offenders, as well as survivors' experiences with injury and efforts to access safety, services, and support.



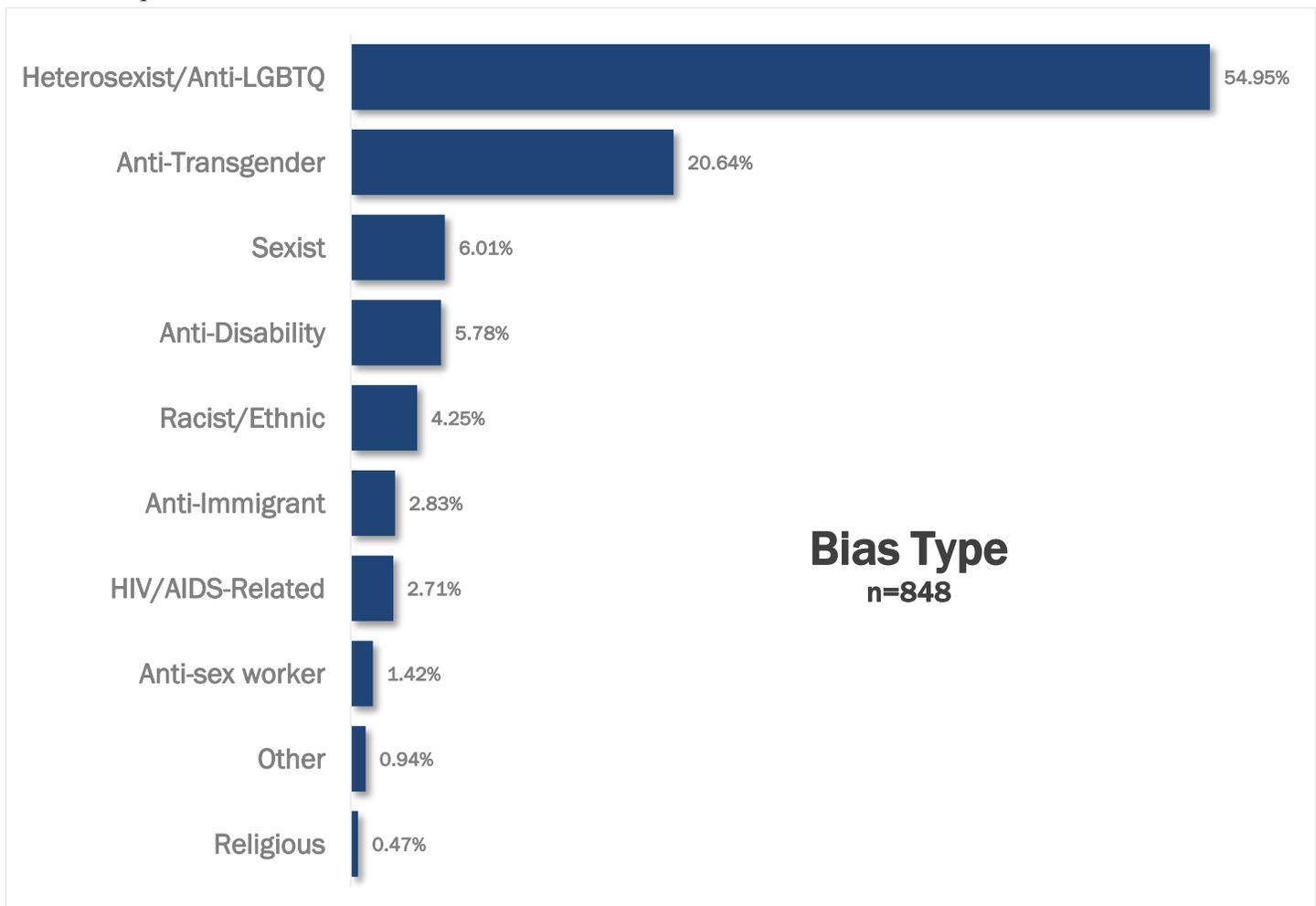
TYPES OF HATE VIOLENCE

Physical violence and discrimination remained the two most common types of hate violence in 2014. While data on violence types remains fairly consistent from year to year, the proportions shift somewhat. In 2013, physical violence was the most commonly experienced form of hate violence, accounting for 18.25% of all incidents. 2014 saw a small decrease in the number of reports of physical violence. Both discrimination and physical violence account for, respectively, 15.67% and 15.61% of all reported incidents of violence, whereas discrimination accounted for 14.04% of incidents in 2013. There was also a marked increase in the number of cases of sexual violence in 2014, which accounted for 8.25% of reported hate violence incidents, an increase from 5.24% in 2013. In 2013 NCAVP documented many instances of brutal violence against LGBTQ and HIV-affected communities and member programs supported survivors of high profile cases of hate violence. Apart from the noteworthy changes in the number of incidents of physical violence, discrimination, and sexual violence, all other categories of violence types remained relatively consistent from previous years. Harassment

accounted for 7.13% of reports, a slight decrease from 2013 (9.16%). Threats and intimidation accounted for 11.81% of total reports of hate violence – consistent with 2013 (11.78%). Bullying accounts for 5.67% of hate violence incidents, remaining consistent with data from 2013. All other categories of violence each made up less than 3% of all incidents, which are similar to their values for 2013. These findings point to the diversity of 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.

BIAS TYPE

In 2014, 54.95% of survivors and victims reported anti-LGBTQ/heterosexist bias, a decrease from 2013 (65.80%), but consistently the most common bias for incidents of hate violence. 20.64% of bias reports were anti-transgender, a slight increase but remaining consistent with data from 2013 (18.48%); it must be noted here that transgender survivors account for 18.88% of total survivors which shows the disproportionate impact of anti-transgender bias against LGBTQ and HIV-affected communities. Reports of anti-immigrant bias increased notably from 2013 when only .49% of survivors faced anti-immigrant hate violence while 2.83% of survivors in 2014 reported the same, which coincides with an increase in the proportion of undocumented immigrants reporting to NCAVP in 2014. A notable decrease was also reported in instances of HIV-related bias, which decreased from 4.87% in 2013 to 2.71% in 2014 as the proportion of HIV-positive survivors reporting to NCAVP member programs also decreased. All other bias types remained fairly consistent with numbers reported in 2013.



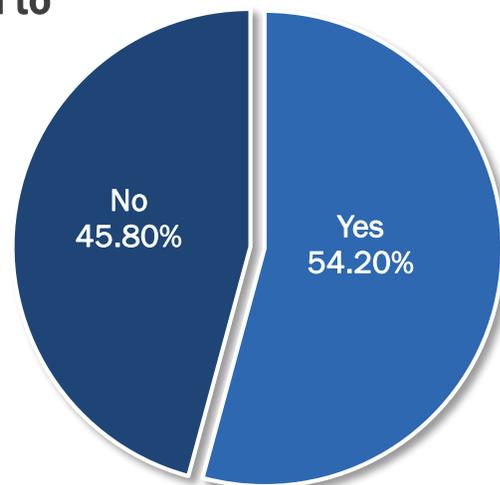
POLICE RESPONSE

54.20% of survivors reported to the police, an increase from 2013 (44.83%). This increase may be attributable to NCAVP member programs who reported creating stronger ties with local police departments, and nationally police and law enforcement personnel are being trained in LGBTQ competency with more frequency. This increase may also be connected to the high levels of severe violence reported to NCAVP in 2014, which often prompt law enforcement response.

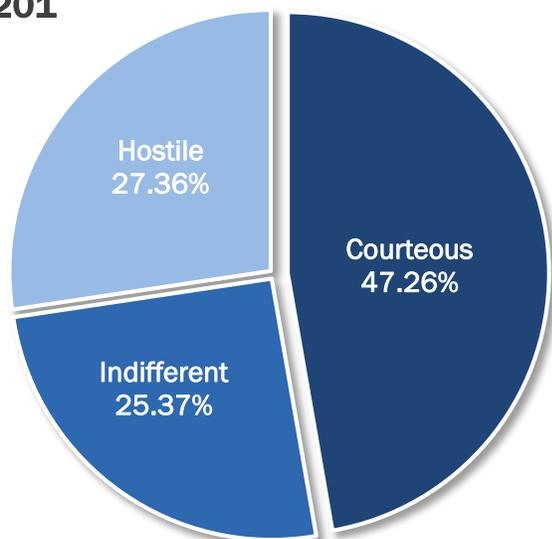
Despite this shift, close to half of LGBTQ and HIV-affected survivors and victims did not report to the police, indicating that substantial barriers to police reporting and high amounts of mistrust continue to exist for many LGBTQ and HIV-affected hate violence survivors and victims.

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.

Reported to Police
n=500



Police Attitude
n=201



POLICE ATTITUDE

47.26% of survivors and victims who interacted with law enforcement in 2014 reported that the police were courteous. This is an increase from 2013, when 37.29% of survivors and victims reported courteous interactions with the police. 27.36% of survivors reported hostile attitudes from the police in 2014, a decrease from 32.20% in 2013 while 25.37% of survivors reported indifferent attitudes from the police in 2014, a decrease from 2013 (28.81%).

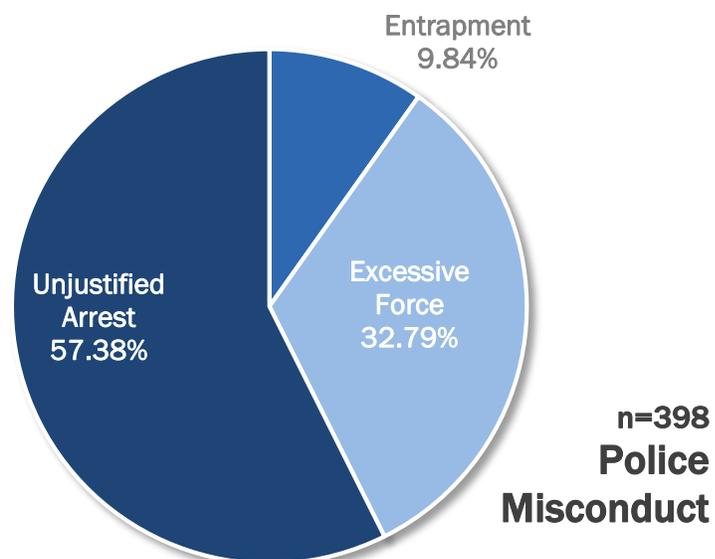
The high number of hostile police interactions is concerning particularly since many NCAVP member programs in 2014 continued or increased programming to educate law enforcement, first responders, and other direct service providers on the specific needs of LGBTQ and HIV-affected survivors of violence. Member programs such as OutFront in Minneapolis, Minnesota, Los Angeles

LGBT Center in Los Angeles, California, BRAVO in Columbus, Ohio, the Kansas City Anti-Violence Project in Kansas City, Missouri, Montrose in Houston, and the New York City Anti-Violence Project all have police training programs where officers receive LGBTQ cultural 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 choose to not engage with law enforcement in the future. NCAVP will continue to document this trend in future reports.

POLICE MISCONDUCT

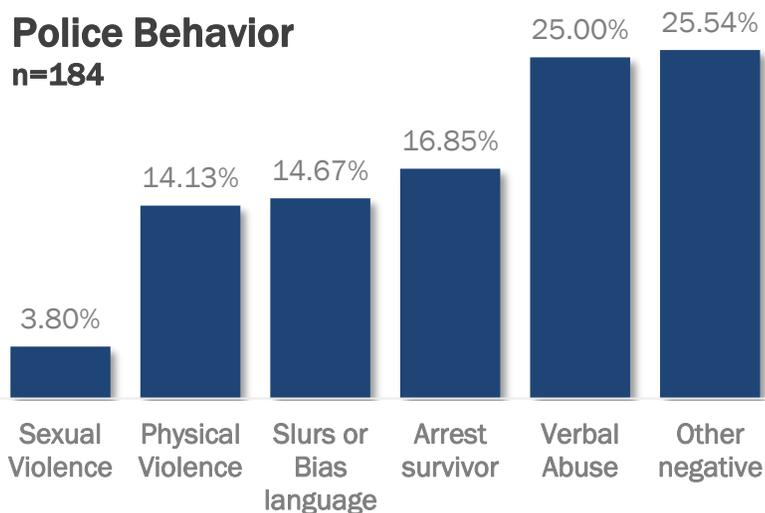
Of the survivors who interacted with the police and experienced hostility and police misconduct, 57.38% reported being unjustly arrested by the police which remains consistent with data from 2013, where 55.00% of survivors were unjustly arrested. Excessive force accounted for 32.79% of police misconduct, which is an increase from 2013 (28.3%). Entrapment accounted for 9.84% of police misconduct, up from 8.33% in 2013. Police raids dropped down from 8.33% in 2013 to 0% in 2014. The number of survivors and victims reporting their experiences of police misconduct increased substantially from 61 in 2013, to 398 in 2014.



POLICE BEHAVIOR

LGBTQ and HIV-affected survivors and victims in 2013 experienced various forms of negative police behavior. Verbal abuse, which can include threats, insults, and intimidating language, accounted for 25.00% of reports, a slight increase from 2013 (24.46%). In contrast, slurs and biased language were used by the police in 14.67% of cases of police misconduct, down significantly from 24.46% in 2013. Physical violence accounted for 14.13% of reports, a small increase from 2013 (11.51%).

Police arrested survivors and victims in 16.85% of reports in 2014 while the data showed that 22.30% of survivors were wrongfully arrested in 2013. Other negative behavior accounted for 25.54% of reports, an increase from 2013 (15.11%). Alarming, sexual violence accounted for 3.80% of reports, an increase from 2.88% in 2013.¹⁵ Police misconduct not only re-victimizes survivors after they have experienced violence, but it can reduce trust and create barriers for LGBTQ and HIV-affected survivors to seeking support



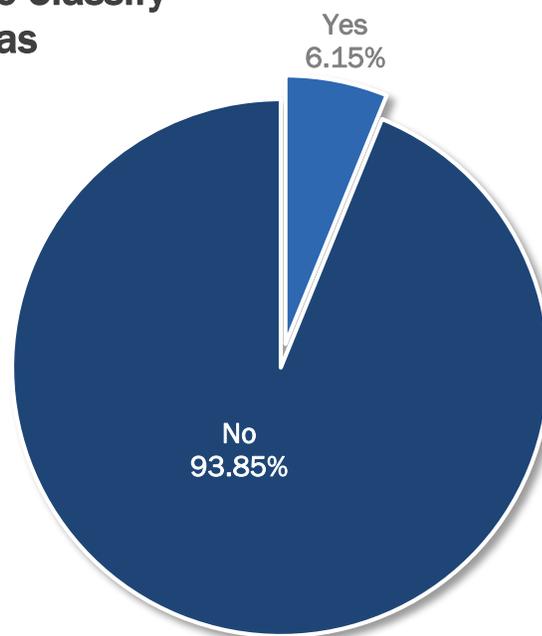
¹⁵ Sexual Violence was included in “other negative” police behavior in 2011.

from law enforcement and anti-violence programs, and lack of a police report may create obstacles for survivors in accessing certain kinds of support or assistance, designated specifically for crime victims. Police misconduct can also contribute to a fear of re-victimization when survivors 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, and LGBTQ cultural competency training efforts should continue.

Bias Classification

In 2014, 6.15% of hate violence incidents reported to the police were classified as bias incidents, also known as hate crimes. This is a substantial decrease from 2013, when 23.80% of the cases were classified as a hate crime. Prosecutors were even less likely to classify incidents of hate violence as hate crimes, as only 1.71% of prosecutors classified incidents of hate violence as hate crimes. 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 many 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.

**Police Classify
as Bias**
n=260



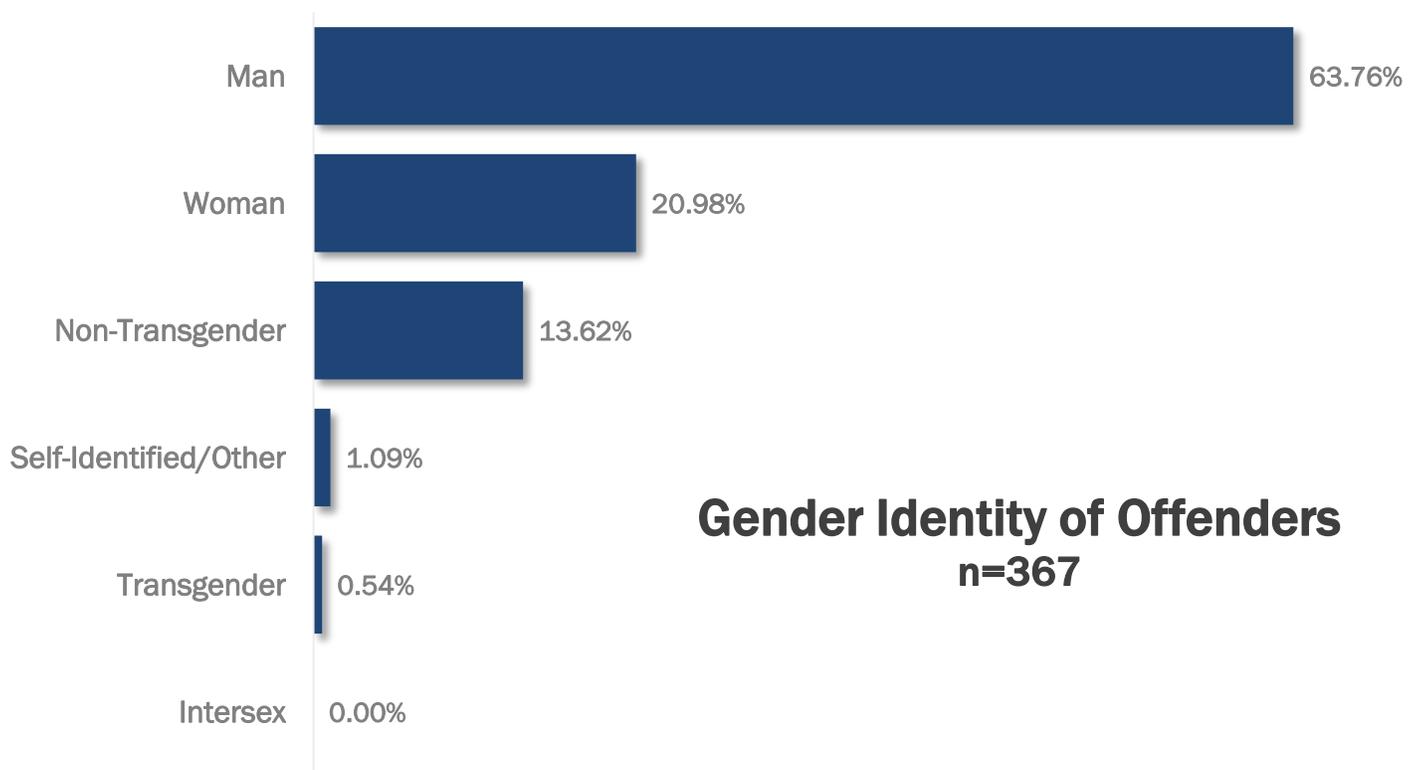
The enhanced penalties that come with most hate crime legislation is also heavily criticized within LGBTQ and HIV-affected communities. Many LGBTQ and HIV-affected individuals and organizations feel that bias crime laws are not preventative and can be disproportionately used against communities of color. Recognizing the many documented racial and economic biases within the criminal legal system, some LGBTQ and HIV-affected 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/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 particular 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 2014.

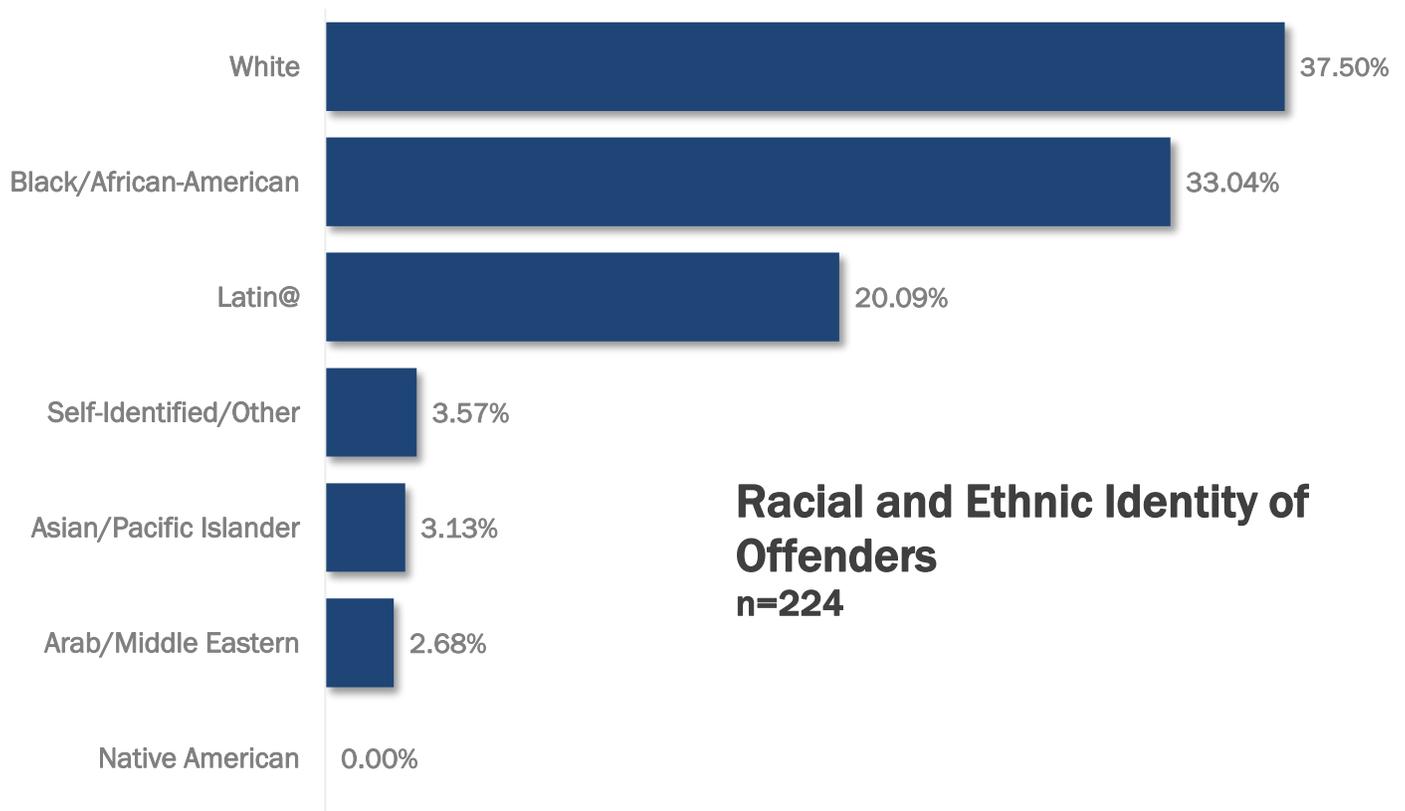
GENDER IDENTITY OF OFFENDERS

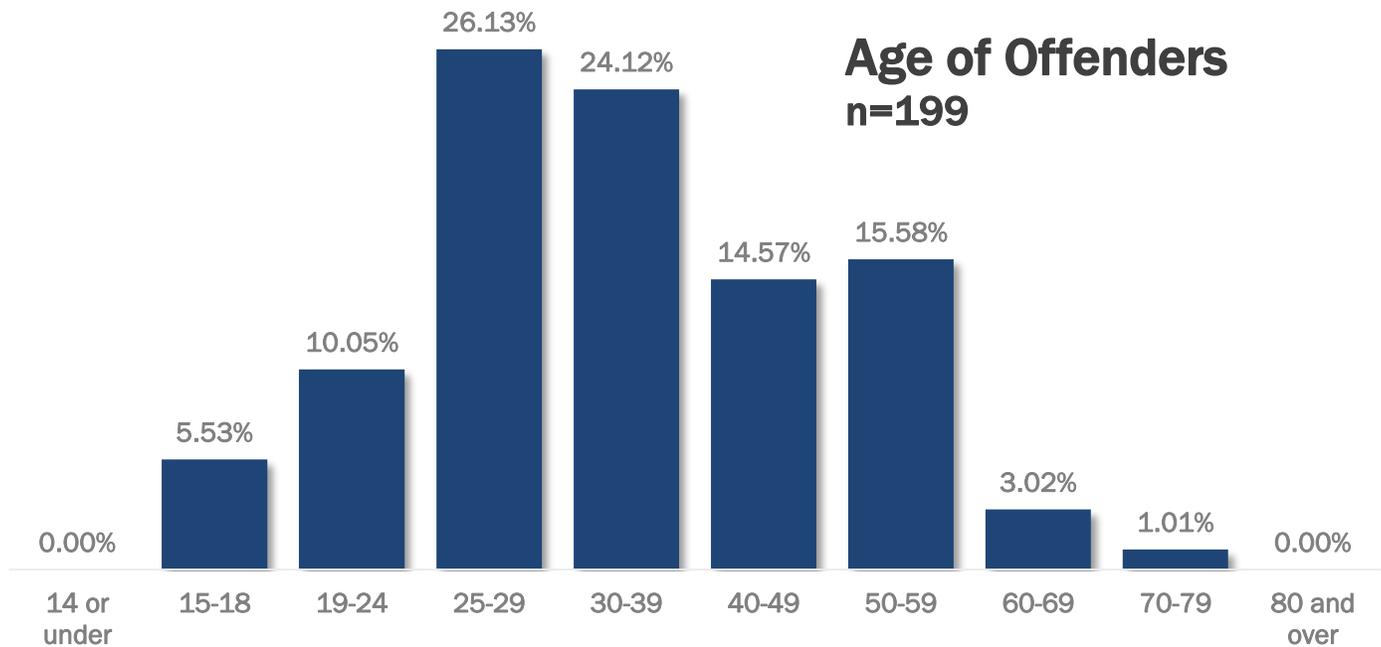
In 2014, men were the majority of the perpetrators of hate violence, representing 63.76% of reports of hate violence offenders, a large increase from 2012 (43.49%). Women made up 20.98% of offenders, an increase from 2013 (18.25%). These increases in the number of men and women perpetrators are due to the decrease in the reporting of the number of offenders identified as cisgender, although it would be safe to assume that a large majority of those offenders identified as men and women are also cisgender individuals. Transgender, intersex, and other self-identified offenders account for less than 2% of offenders in instances of hate violence. These findings suggest, similar to age, that offenders are more likely to target people of the same identity they hold, except for hate violence incidents involving transgender survivors, who usually identify the person who acted violently against them as cisgender. This is the second year that NCAVP has collected this data, and we believe that the data, while reflecting the survivors and victims' perceptions, is more accurate for men and cisgender offenders than for other gender identities. This data gives policymakers and practitioner's important information on the need to target hate violence prevention programs towards cisgender men.



RACIAL AND ETHNIC IDENTITY OF OFFENDERS

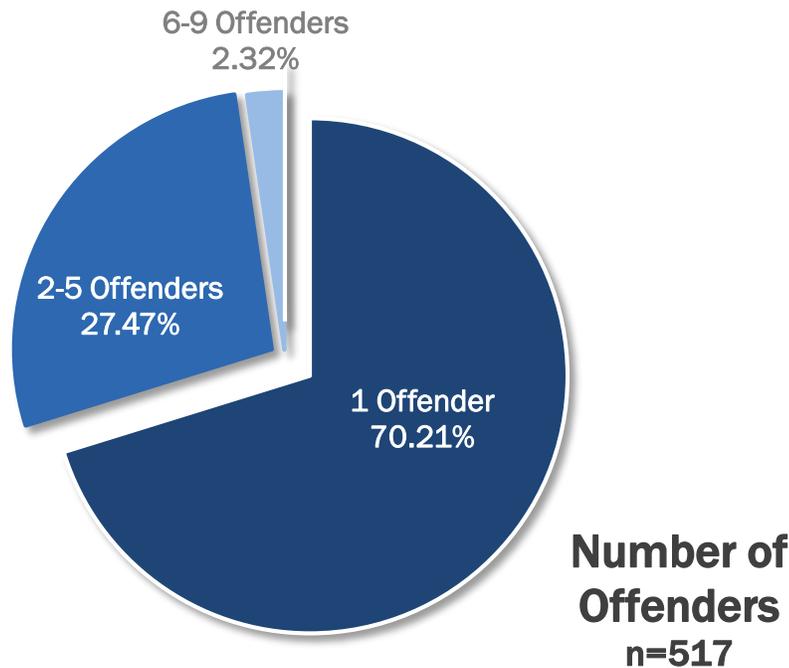
In 2014, most instances of hate violence against LGBTQ and HIV-affected communities (37.50%) were committed by offenders perceived to be White by survivors, an increase from 2013, when White offenders accounted for 27.30% of total offenders. Black and Latina@ offenders account for 33.04% and 20.09% of offenders respectively. In 2013 Black offenders were identified in 34.14% of incidents while Latin@ offenders accounted for 20.68% of overall offenders. In 3.57% of hate violence incidents, the perpetrators were not identified as clearly belonging to a particular ethnic or racial category and were identified as “self-identified or other” by survivors which is consistent with data from 2013. Asian/Pacific Islander, Arab/Middle Eastern and Native American offenders make up a combined total of less than 8% of offender racial identities. It is important to note that offender race is based on the survivor’s perception of the offenders’ racial identity, and data in this category often does not show any particular trends from one year to the next.





AGE OF OFFENDERS

In 2014 36.18% of offenders were between 19-29 years of age, an increase from 2013 (30.70%). Ages 30-39 and 40-49 represent 24.12% and 14.57% of reports, consistent with 2013 data. The number of youth offenders, between the ages of 15-18 also decreased from 10.46% in 2013 to 5.53% in 2014. The range of reported ages of offenders mirrors that of LGBTQ and HIV-affected survivors of hate violence, suggesting that offenders are likely to be close in age with the survivors. This data also shows the need for hate violence prevention strategies and LGBTQ and HIV-affected education programs targeted at youth and young adults.



TOTAL NUMBER OF OFFENDERS

In 2014 70.21% of survivors were attacked by one offender, a slight increase from 2013 (68.75%). Also in 2014, 27.47% of survivors reported 2-5 offenders, which is fairly consistent with 2013 (23.08%), and there were no reports of more than 10 offenders. 2.32% of survivors reported 6-9 offenders, which is a decrease from 2013 (5.77%). The increase in multiple offenders is likely reflecting 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 approval¹⁶, which increases the amounts of offenders. Anti-LGBTQ and HIV-affected group violence may be particularly common due to a need on the part of 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.¹⁷

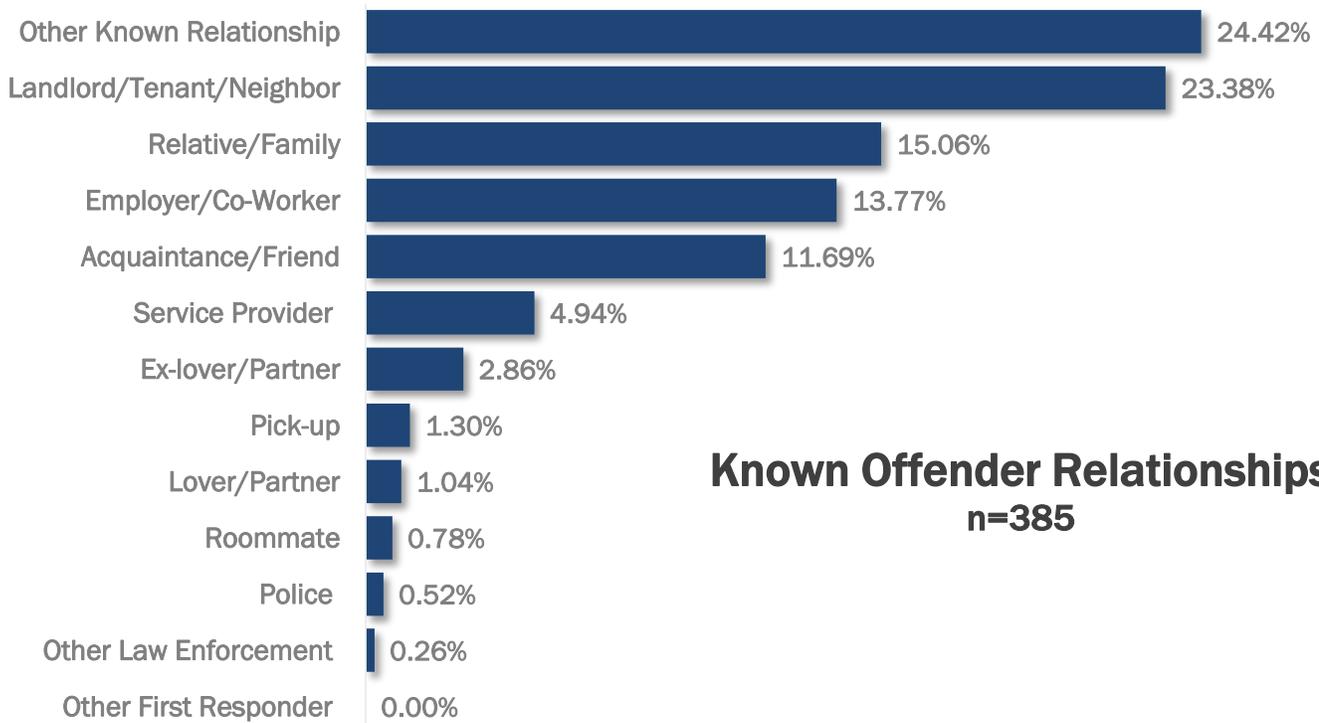
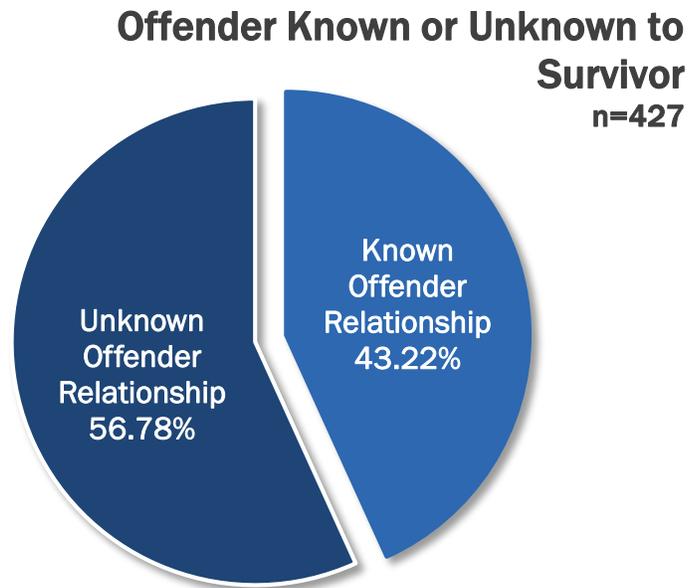
¹⁶ McDevitt, J., et al. “*Hate Crimes: Characteristics of Incidents, Victims, and Offenders*”, Accessed from http://www.sagepub.com/upm-data/14238_Chapter6.pdf in April, 2015.

¹⁷ *Ibid*

OFFENDER RELATIONSHIPS

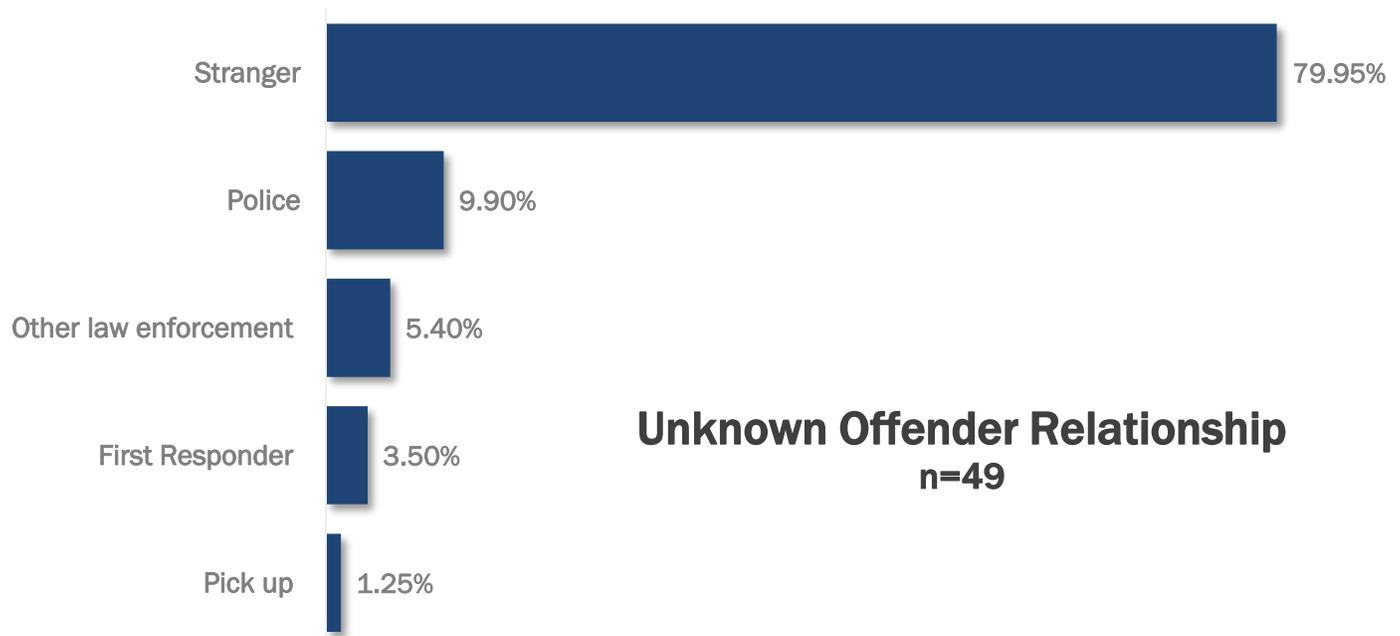
Data collected by NCAVP from 2014 indicates that in 43.22% of cases of hate violence, the offender was someone whom the survivor already knew, which contradicts the popular belief that hate violence is usually perpetrated by strangers.

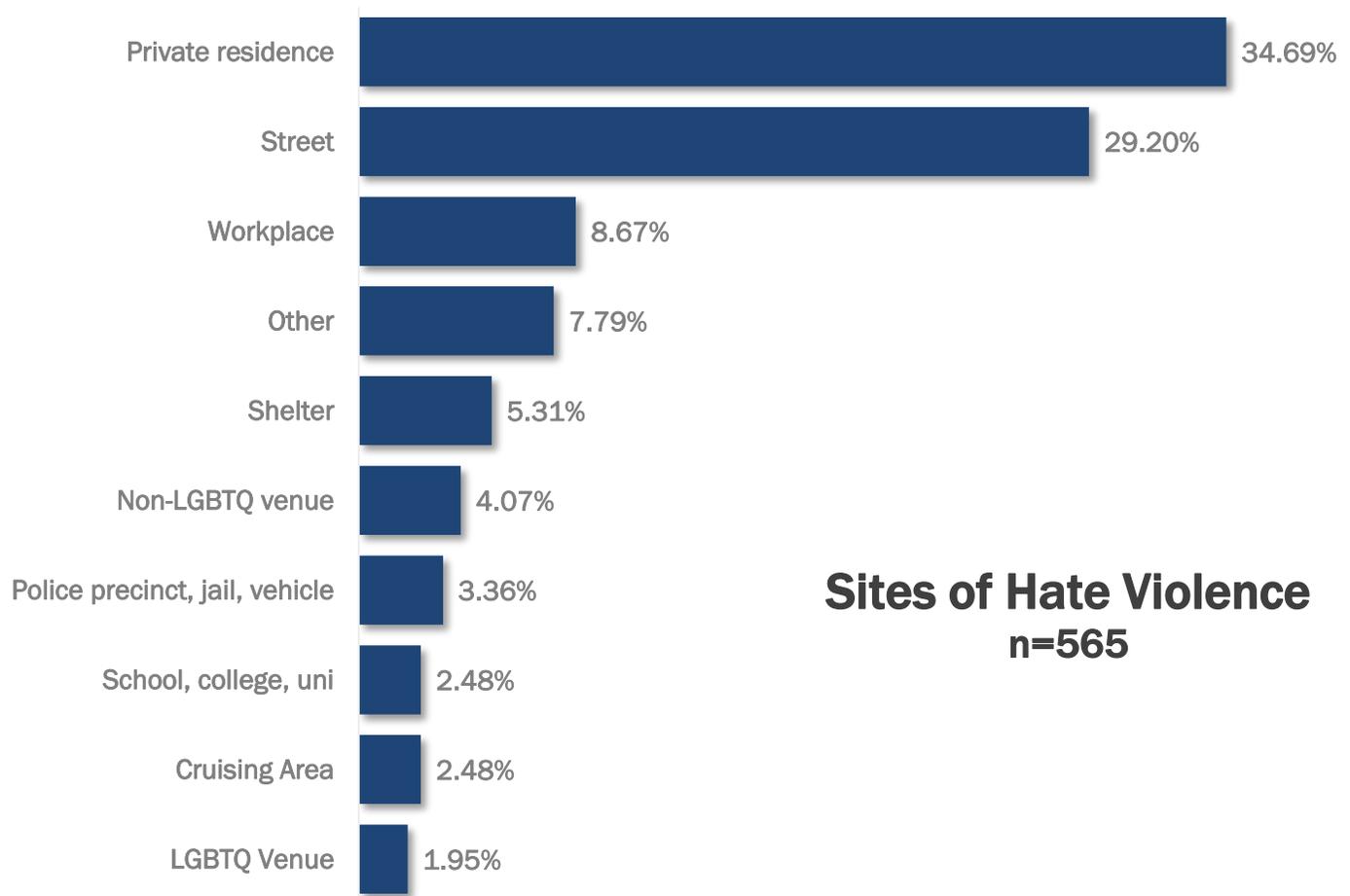
In 2014, as in 2013, landlords, tenants, and neighbors represented the most common category of known offenders (23.38%), a slight decrease from 2013 (25.83%). Employers and co-workers represented 13.77% of known offenders, which is consistent with 2013 when 15.53% of known offenders were employees and co-workers. Relatives and family represented 15.06% of known offenders, another increase from 2013 (14.95%). Within known offenders, other relationships represented 24.42% of total reports, a significant increase from 2013 (14.37%), which indicates that these categories are not exhaustive. Acquaintances and friends represented 11.69% of known offenders, remaining fairly consistent with 2013 data (9.87%). The police and other law enforcement combined represent less than 1% of hate violence offenders. Ex-lovers, ex-partners, lovers and partners, service providers, roommates, and first responders each represent 5% or less of known offenders.



These findings reflect the diversity of hate violence offenders showing that LGBTQ and HIV-affected people experience hate violence from a range of people in their lives, from landlords, from employers, within families, and from law enforcement. The increase in hate violence from employers, co-workers, and landlords points to the need for non-discrimination policies for LGBTQ and HIV-affected people to prevent workplace and housing based hate violence. For some LGBTQ and HIV-affected, communities, pervasive experiences of hate violence and discrimination can result in long-term economic consequences.

In 2014, 79.75% of unknown offenders were strangers, a decrease from 2013 (87.43%). Only 9.90% of unknown offenders were police, a significant decrease from 2013 (23.93%). In 1.25% of cases where the offender was indicated as unknown, the violence was reported to be related to pick-up/hook-up violence which remains consistent with 2013 (1.53%). To address pick-up/hook-up related hate violence, the New York City Anti-Violence Project, and other NCAVP members are engaged in targeted outreach through online dating and hook-up sites.





SITES OF HATE VIOLENCE

In 2014, most incidents of hate violence (34.69%) occurred in a private residence, while 29.20% of incidents occurred in public, which mirrors the most common sites for hate violence in the FBI Hate Crime Statistics report as well.¹⁸ This demonstrates that hate violence is not always random or misdirected violence but is often perpetrated by people known to the survivor. The workplace and shelters were also common sites for hate violence to occur, respectively accounting for 8.67% and 5.31% of sites. Although shelters account for only 5.31% of sites for hate violence in NCAVP's data, it is important to highlight that transgender survivors have historically had very limited access to shelters and experience disproportionate violence in shelters and other similar communal housing settings. All other site types account for less than 5% of the total.

¹⁸ 2013 *Hate Crime Statistics: Location type*. (2014, November 20). Accessed from http://www.fbi.gov/about-us/cjis/ucr/hate-crime/2013/topic-pages/location-type/locationtype_final in April, 2015

DISCUSSION

VIOLENCE AGAINST TRANSGENDER PEOPLE

Disproportionate impact of homicides of trans women of color

In 2014, anti-LGBTQ and HIV-affected homicides increased by 11.11% (18 in 2013 to 20 in 2014). NCAVP's data continues to highlight the disproportionate impact of homicide against transgender women of color in 2014. Out of these homicides, 55.00% of victims were transgender women, and 50.00% were transgender women of color, primarily Black transgender women. These homicide rates are disproportionately high for these communities as compared to their representation within NCAVP's overall sample. This trend highlights the impact of the multiple forms of bias that these communities experience including: racial bias, gender bias, gender identity bias, and sexual orientation bias on decreased safety for these communities. NCAVP has documented a multi-year trend of severity and disproportionate impact of hate violence against LGBTQ people of color and transgender and gender non-conforming people that continues in 2014, which sheds light on the importance of targeting prevention and outreach efforts in marginalized communities.

There is a lack of LGBTQ and HIV-affected anti-violence intervention and prevention strategies that center the leadership of marginalized LGBTQ and HIV-affected people, particularly transgender people of color. Some model programs do exist, such as Casa Ruby Community Center in Washington DC, which provides comprehensive services and community events for transgender people of color, the Translatin@ Coalition, the Trans Pride Initiative, Solutions Not Punishment Coalition (SNaPCo), and the TransJustice program of the Audre Lorde Project. All government agencies can play a crucial role in reducing violence against these communities. The federal government funds some violence prevention initiatives, however very little specific funding supports LGBTQ and HIV-affected anti-violence initiatives. In addition to supporting comprehensive LGBTQ hate violence prevention initiatives, there is a need for governmental agencies to identify violence against transgender women of color as a crisis, and to address the disproportionate violence against these communities. Government agencies can 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 transphobic, homophobic, and biphobic violence, such as the Transgender Awareness campaign in Washington, DC.

Transgender people of color also experience severe employment discrimination and poverty. In a study by the Nation Center for Transgender Equality and the National Gay and Lesbian Task Force titled "Injustice at Every Turn: A report of the National Transgender Discrimination Survey" 26% of respondents lost a job due to being transgender or gender non-conforming; 19% had experienced homelessness at some point in their lives; and

transgender people were four times as likely as the general population to be living in extreme poverty, with incomes less than \$10,000 per year.¹⁹ The severe marginalization of transgender women of color through discrimination, poverty, and violence places transgender women of color at risk of deadly violence. Economic empowerment programs, including jobs programs and resume building specifically for transgender women of color, can be an important anti-violence strategy. A lack of visibility of transgender people of color also contributes to the culture of violence against transgender women of color. Increasing the cultural competency and awareness of the media to address hate violence against these communities is also a critical intervention to reduce this violence. While media attention to anti-LGBTQ and HIV-affected homicide is improving, NCAVP still recognizes that limited media attention on this issue impacts NCAVP's ability to monitor incidents of homicide, particularly in areas where NCAVP does not have member programs.

Significant increase in transgender survivors

In 2014, reports of hate violence against transgender people increased by 13%. NCAVP has documented and amplified the disproportionate impact of severe and deadly violence against transgender communities for several years, and encourages LGBTQ and HIV-affected anti-violence programs to target outreach and services to transgender communities. This significant increase may be in part due to transgender specific initiatives, programs, and targeted outreach at LGBTQ and HIV-affected anti-violence programs, including the Survivors Organizing for Liberation (formerly the Colorado Anti-Violence Program), Los Angeles LGBT Center, Trans Pride Initiative of Dallas, Community United Against Violence in San Francisco, and the New York City Anti-Violence Project.

Police violence against transgender communities

In 2014, NCAVP documented disproportionate police violence against transgender communities. Transgender people as a whole were 3.1 times more likely to experience police violence than non-transgender people, and 6.2 times more likely to experience physical violence from the police. These findings continue a multi-year trend of police violence against transgender communities. Law enforcement agencies have a long history of gender policing and violence against transgender and gender non-conforming communities.²⁰ Transgender people in particular may be at risk of being profiled as being engaged in sex work, and commonly have negative and violent interactions with law enforcement. This discussion section contains a fuller analysis of police violence against LGBTQ and HIV-affected communities, however it is important to highlight the alarming trends in police violence against transgender communities, and warrants immediate action from policy makers, funders, and anti-violence organizations.

Hate violence against transgender women

NCAVP documented disproportionate experiences of hate violence against transgender women in 2014. In addition to the alarming percentage of homicides of transgender women, transgender women were almost twice

¹⁹ National Center for Transgender Equality and National Gay and Lesbian Task Force, Equality “*Injustice at Every Turn: A Report of the National Transgender Discrimination Survey*” February 2011. Accessed from http://transequality.org/PDFs/Executive_Summary.pdf in May, 2015.

²⁰ Catherine Hanssens, Aisha C. Moodie-Mills, Andrea J. Ritchie, Dean Spade, and Urvashi Vaid. 2014. “*A Roadmap for Change: Federal Policy Recommendations for Addressing the Criminalization of LGBT People and People Living with HIV*.” New York: Center for Gender & Sexuality Law at Columbia Law School. Accessed in April, 2015.

as likely (1.6) to experience sexual violence, highlighting a disproportionate impact of sexual violence against transgender women. Hate motivated sexual violence is a unique and serious form of violence. Disproportionate experiences of sexual violence against transgender women may highlight how transphobia in our society scrutinizes and punishes transgender people because their bodies, particularly their genitalia, do not conform to narrow societal expectations of gender. Because our society is transfixed on transgender bodies and specifically, genitalia, hate violence offenders may focus their hatred and violence against transgender women on their bodies and genitalia.

Transgender women were also 5.8 times more likely to experience police violence, and 6.1 times more likely to experience physical violence from the police. Transgender women in particular are often profiled and harassed by law enforcement, and NCAVP has documented very severe incidents of police violence against transgender women. These person level findings of police violence against transgender women provide insight into the continued policing and violence against transgender women at the hands of law enforcement. A fuller analysis of police violence is included in the police violence section of this discussion.

Transgender women were thrice as likely to experience discrimination as non-transgender women in 2014. This data aligns with additional research on discrimination against transgender people. This finding highlights the critical importance of non-discrimination laws and policies which protect people from discrimination based on gender identity and expression.

Hate violence against transgender men

In 2014, transgender men were 3.5 times more likely to experience violence in shelters. This finding highlights the unique experience of transgender men within sheltering services, such as homeless shelters and domestic violence shelters. Transgender people experience high rates of poverty and homelessness due to employment discrimination, but may not be safe entering homeless shelters due to transphobic violence.²¹ This violence can come from other shelter residents or staff. To address this issue, some LGBTQ and HIV-affected advocacy organizations provide critical training and technical assistance to social service providers to protect LGBTQ communities, such as the National Training and Technical Assistance Center, and the National LGBTQ Task Force's "Transitioning Our Shelters" initiative.²²

²¹ 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 in May 2015.

²² Mottet, L., & Ohle, J. (2003). *Transitioning Our Shelters: A Guide to Making Homeless Shelters Safe for Transgender People*. New York. Accessed in April, 2015.

LOW INCOME LGBTQ AND HIV-AFFECTED COMMUNITIES

NCAVP began to collect data on socioeconomic status for the first time in 2013, however the sample size and inconsistencies in data types did not meet the threshold for statistical significance. However, in 2014 NCAVP was able to analyze person level data on survivors income for the first time since the publication of the report. The data shows that low-income LGBTQ and HIV-affected survivors of violence are especially vulnerable to discrimination and hate violence in the workplace.

Many studies chronicle that impoverished communities experience higher rates of violence and decreased access to resources to address this violence.²³ Through culturally-specific service provision, NCAVP members see these same trends within LGBTQ and HIV communities and the data in 2014 confirms this observation. One way that poverty can increase violence is in access to safe employment. As the data from 2014 highlights, LGBTQ people of color, transgender people, and transgender people of color face high rates of discrimination. Homophobic, biphobic, and transphobic discrimination can eliminate access to traditional employment options for transgender and LGBTQ and HIV-affected people of color communities. The National Transgender Discrimination Survey 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.²⁴ Sex work and drug sales are accessible and lucrative forms of employment for communities that face barriers to traditional forms of employment. These forms of employment are also correlated with high rates of violence.

These circumstances can create critical barriers when accessing support for violence and places LGBTQ and HIV-affected communities at further risk. In order to reduce severe violence against these populations, there must be increased economic opportunities for low income LGBTQ and HIV-affected people, in addition to programs that reduce discrimination. Programs such as the Transgender Economic Empowerment Initiative²⁵, recruits transgender-friendly employers in safe and welcoming employment which decreases the risk of transgender people being driven to engage in employment that places them at higher risk for violence. Additionally, barriers to accessing housing, food, and employment for people with criminal records at federal and state levels create barriers for people to meet their basic needs, further driving them into poverty and criminalized economies.

There is a need for increased employment opportunities and economic assistance for LGBTQ and HIV-affected communities, especially low-income LGBTQ people of color and transgender people on the federal state and local level. LGBTQ specific non-discrimination legislature in employment, housing, access medical care and

²³ Short, James F., Jr. *Poverty, Ethnicity, and Violent Crime.* Boulder, CO: Westview Press, 1997.

²⁴ 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 in April, 2015.

²⁵ Transgender Economic Employment Initiative. Accessed from <http://www.teeisf.org/> in April, 2015.

other resources, job assistance and training, economic empowerment projects, and increased federal funding for social welfare programs that target LGBTQ communities are necessary to alleviate the discrimination and violence faced by low-income LGBTQ and HIV-affected communities. Project Empowerment²⁶ 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.

Additionally, the disproportionate impact of homicide on transgender communities of color can in part stem from their economic status; therefore NCAVP is committed to continuing to gather data on the socioeconomic indicators for future reports. Research from other sources show that LGBTQ and HIV-affected people²⁷ and LGBTQ and HIV-affected people of color, particularly those who identify as Black and Latin@, have higher unemployment and poverty rates²⁸ within LGBTQ communities. Transgender people experience legalized employment discrimination, and have twice the national rates of poverty.²⁹ According to the National Center for Transgender Equality (NCTE) and National LGBTQ Task Force's findings in "Injustice at Every Turn," Black and Latin@ transgender people are at greater risk for housing discrimination, employment discrimination, educational discrimination, and decreased access to resources. The survey found that 34% of Black transgender people and 28% of Latin@ transgender people were living in extreme poverty.³⁰ Transgender people of color, especially those who identify as Black and Latin@, experience poverty at four times the national average.³¹

High rates of homelessness among these disproportionately impacted communities also increases their risk of violence. NCTE also documented that within transgender communities, 19% of respondents reported experiences of being refused a home or apartment and 11% reported being evicted because of their gender identity or gender expression. One-fifth of NCTE's respondents (19%) reported experiencing homelessness at some point in their lives because they were transgender or gender non-conforming and the majority of those trying to access a homeless shelter were harassed by shelter staff or residents (55%), and 29% were turned away altogether.³² 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

²⁶ 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, 2014.

²⁷ Albelda, R, Badgett, M.V.L., Schneebaum, A., and Gates, G. *Poverty in the Lesbian, Gay, and Bisexual Community* (2009). Accessed from <http://williamsinstitute.law.ucla.edu/wp-content/uploads/Albelda-Badgett-Schneebaum-Gates-LGB-Poverty-Report-March-2009.pdf> in March, 2015.

²⁸ US Department of Labor, Bureau of Labor Statistics data. Accessed from <http://www.bls.gov/cps/cpsrace2009.pdf> in March, 2015.

²⁹ *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey*, *op. cit.*

³⁰ 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 in April, 2014.

³¹ Grant, *op. cit.*

³² National Center for Transgender Equality and National Gay and Lesbian Task Force, "Injustice at Every Turn" (2011). Accessed from http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf in April, 2015.

for hate violence motivated by gender identity or gender expression, racial identity and class status. For transgender community members, this can substantially increase their risk of violence.

Apart from NCAVP data, research has shown that there is a strong link between poverty and the experience of hate violence. That this relationship is even more severe for LGBTQ and HIV-affected communities is no surprise and NCAVP data reinforces this assumption. For LGBTQ and HIV-affected communities, especially those with intersecting marginalized identities, this relationship can be dangerous and even fatal. For violence against LGBTQ and HIV-affected communities to be holistically addressed the issue of poverty cannot be ignored and must be addressed at by federal, state, and local lawmakers as well as funders and service providers.

POLICE VIOLENCE AGAINST LGBTQ AND HIV-AFFECTED PEOPLE

Within NCAVP's person level data, transgender people, people of color, young adults, and transgender people of color all faced an increased risk of hate motivated police violence. Many NCAVP members supported LGBTQ and HIV-affected survivors who were falsely arrested, experienced violence, and/or were profiled based upon race, immigration status, HIV-status, sexual orientation, gender identity, and gender expression.

The criminalization and policing of LGBTQ and HIV-affected communities has a long history in the U.S., from bar raids of LGBTQ establishments, arresting people not wearing three articles of clothing which matched their assigned gender, to sodomy laws which criminalized consensual same-gender sexual activity. Many forms of police violence and the criminalization of LGBTQ and HIV-affected people continues to this day. 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. As NCAVP's data suggests, these issues particularly affect transgender communities of color. Additionally, law enforcement are increasingly raiding immigrant communities in immigration enforcement efforts, which contributes to police violence against undocumented LGBTQ and HIV-affected people.

The policing and criminalization of LGBTQ and HIV-affected communities has devastating impacts. In many states, certain criminal records can bar access to basic assistance 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. 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, and many states currently maintain this ban without modification.³³ 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. The collateral consequences of holding a criminal record only create further barriers to safety for LGBTQ and HIV-affected people.

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, and increase police violence against them.

³³ 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> in May, 2015.

Police officers and law enforcement agencies often lack knowledge on LGBTQ and HIV-affected communities, particularly LGBTQ and HIV-affected communities of color, transgender communities, and LGBTQ and HIV-affected youth. This can result in officers using inappropriate and disrespectful language, conveying hostile attitudes, and committing violence against LGBTQ and HIV-affected people. Many NCAVP member programs provide LGBTQ training to local law enforcement. The focus of these programs is to make sure LGBTQ and HIV-affected people do not face homophobic, biphobic, and transphobic violence and harassment when engaging with the police. NCAVP member programs like the Kansas City Anti-Violence Project in Kansas City, Missouri, 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 45% of survivors did not report their incidents of violence to law enforcement. This highlights a continued need for anti-violence programs to create community-based interventions that do not rely on the criminal legal system. These interventions could prove particularly supportive to meet the needs of marginalized LGBTQ and HIV-affected communities, many of whom 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 has 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 can be funded and evaluated that can provide functioning alternatives where law enforcement is not supportive or adequate.

An alarming trend that NCAVP is currently monitoring is the practice of arresting survivors who engage in self-defense against anti-LGBTQ attacks. In recent years, high profile cases have sparked national dialogue and outreach when survivors are given prison sentences for defending themselves against attacks, including the cases of the New Jersey Four, CeCe McDonald in Minnesota, Nate Mancha in Colorado, Luke O'Donovan in Georgia, and Eisha Love in Illinois. NCAVP's 2014 data showed that of the 61 respondents that reported police misconduct, 57.38% were unjustly arrested, an almost 3% increase from such reports in 2013. These statistics demonstrate why many LGBTQ survivors of hate violence are reluctant to rely on the criminal justice system to seek redress when experiencing hate violence. While much progress has been made with regards to law enforcement attitudes towards LGBTQ communities, the criminalization of LGBTQ people, especially LGBTQ people of color, continues to this day and presents a foremost barrier for survivors of anti-LGBTQ hate violence.

Many LGBTQ and HIV-affected organizations across the country are engaged in campaigns against police violence against LGBTQ and HIV-affected communities. NCAVP members, BreakOUT! in New Orleans, Solutions Not Punishment Coalition of the Racial Justice Action Center in Atlanta, Georgia, Community United Against Violence in San Francisco, the DC Trans Coalition and GLOV in Washington, DC, the Los Angeles LGBT Center, Survivors Organizing for Liberation (formerly the Colorado Anti-Violence Program), and the New York City Anti-Violence Project are all engaged in local campaigns to end policing and criminalization of LGBTQ and HIV-affected people. Streetwise and Safe (SAS), which organizes LGBTQ youth of color in the sex trades in New York City, and BreakOUT! launched a national Know Your Rights network for LGBTQ youth engaging with law enforcement. While NCAVP's data documents pervasive and troubling police violence

against LGBTQ and HIV-affected communities, there are many examples of campaigns and organizing efforts combating this violence across the country.

SITES OF HATE VIOLENCE

It is a common perception that hate violence against LGBTQ and HIV-affected communities occurs primarily on the street and in public spaces, however NCAVP's data shows that the most common site type for hate violence is within a private residence (34.69%). This data also reflects offender demographics, where almost 43% of survivors knew their offender, with landlord/tenant/neighbor offenders making up a significant percentage (25.83%) of known offenders.

Street and public violence was the second highest percentage of violence sites, at 29% of reports. This data from NCAVP mirrors the most common site types for hate crimes in the FBI's Hate Crime Statistics Report from 2013, where 31.5% of hate crimes occurred in or near residences and 18.1% occurred in public areas (highways, streets, alleys, etc.), these two site types were the two most common ones in the FBI's report as well.³⁴ Gay men, transgender women, and LGBTQ and HIV-affected people of color were more likely to experience violence in public as compared to other identities. This may highlight that certain safety planning and public violence interventions should be targeted at outreaching and engaging these communities.

9% of hate violence incidents occurred in the workplace, with lesbian women 1.3 times more likely to experience violence in the workplace as compared to other identities. These findings highlight the intersections of workplace discrimination, sexism, and violence. Women in general currently experience higher rates of discrimination in the workplace. Lesbian women may be at an increased risk of workplace discrimination and violence due to sexism and homophobia, and currently there is no federal law which comprehensively bans employment discrimination based on sexual orientation and gender identity.

³⁴ United States Department of Justice, Federal Bureau of Investigation. (December 2014). *Hate Crime Statistics, 2013*. Accessed from http://www.fbi.gov/about-us/cjis/ucr/hate-crime/2013/topic-pages/location-type/locationtype_final in March, 2015.

HATE VIOLENCE AGAINST GAY MEN

In 2014, gay men reported unique experiences related to hate violence. Gay men continued to face severe hate violence, as in previous years, more violence in public spaces, and a higher likelihood of reporting their experiences to police.

NCAVP found that gay men were 2.3 times more likely to experience physical violence compared to overall survivors in 2014. Gay men were also 1.8 times more likely to experience injury and 1.5 times more likely to require medical attention than survivors who were not gay men, highlighting a severity of violence against gay men. Gay men also faced disproportionate physical violence and injury in previous years, which highlights that severe physical violence against gay men is a multi-year trend. Gay men are some of the most visible people within LGBTQ and HIV-affected communities, and face discrimination based on a multitude of anti-gay stereotypes. For some gay men, this visibility can lead to more affluence, but for others it may also result in an elevated risk of violence. More severe physical violence and injury can require more medical attention. Gay men were also more likely to experience hate violence in public spaces, which may suggest that violence in public spaces results in more severe and injurious violence. Additionally, societal notions of masculinity are often connected to violence, and gay men may be viewed as deserving of severe physical violence. This data may suggest that anti-gay violence has serious physical health implications for gay men, and more research is needed into the public health implications of anti-gay violence, particularly on the health outcomes of gay men.

Gay men were 1.4 times more likely to report their experiences to police after experiencing hate violence. Gay men, particularly White cisgender gay men, may be more likely to report to police because they may have better experiences with law enforcement than other LGBTQ and HIV-affected identities and have more trust in engaging with law enforcement. Gay men may also be more likely to report to police, or have police called by bystanders, because they are more likely to experience violence in public spaces and require medical attention. Seeking medical attention may inadvertently also notify law enforcement when survivors reach out to first responders. Public spaces may also be more likely to have a police presence, or bystanders who notify police when they witness violence happening. This finding is also supported by data compiled by the Williams Institute which found that gay men are more likely to report incidents of hate violence when compared to other LGBTQ targets of hate violence.³⁵

³⁵ 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/> in April, 2015.

LGBTQ AND HIV-AFFECTED WOMEN AND SEXUAL VIOLENCE

In 2014, NCAVP continued to document that women identified survivors reported disproportionately higher experiences of sexual violence. Women made up 24% of the total survivors and victims reporting in 2014. A significant portion of women survivors identified as transgender women in 2014. A large majority of transgender identified survivors in 2014 were transgender women. Of the total transgender identified survivors who reported to NCAVP, 80.9% of transgender survivors identified as transgender women. NCAVP analyzed the unique experiences of survivors who identified as women generally, including transgender women. NCAVP also analyzed the unique experiences of transgender women specifically.

Women in general were 2.3 times more likely to experience hate-motivated sexual violence compared to overall survivors, which is consistent with person level findings from the previous year. When NCAVP compared the experiences of transgender women to all other survivors, NCAVP found that transgender women were 1.6 times more likely to experience hate-motivated sexual violence. When NCAVP compared the experiences of cisgender women to all other women, NCAVP found that cisgender women were 1.7 times more likely to experience hate-motivated sexual violence. Sexual violence can be committed against any gender. However, due to the historical and current role of sexual violence against women as a tactic of sexism, offenders may specifically target LGBTQ and HIV-affected women for hate-motivated sexual violence. A common form of hate motivated sexual violence is “corrective rape,” where perpetrators target and sexually assault LGBTQ people in order to try to change their sexual orientation, gender identity, or as a form of punishment. High rates of sexual violence victimization against women are well-documented by researchers and public institutions.³⁶ More recent research has also documented disparate impacts of sexual violence against lesbian and bisexual women. According to the Centers for Disease Control’s 2010 National Intimate Partner and Sexual Violence Survey, lesbian women and bisexual women experienced higher lifetime prevalence rates of sexual violence other than rape than heterosexual identified women.³⁷ The NISVS did not include data on the experiences of transgender people. This data suggests that LGBTQ and HIV-affected women may be at higher risk of experiencing hate-motivated sexual violence, and more research is needed on violence against women, hate motivated sexual violence, and the disproportionate impact on LGBTQ and HIV-affected women.

36 Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

37 Walters, M.L., Chen J., & Breiding, M.J. (2013). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

BISEXUAL SURVIVORS

Bisexual survivors made up 8.95% of total survivors who reported to NCAVP in 2014, which remains fairly consistent with 2013. Bisexual people face oppression and discrimination from the general society, but may also experience biphobia from gay and lesbian communities who may not view them as a part of the LGBTQ communities. Bisexual people may face unique and additional barriers in accessing support for violence, given that they can face discrimination from multiple fronts. Bisexual communities remain under represented within total survivors, but recent research suggests that bisexual people face unique and disproportionate experiences of violence. The Centers for Disease Control found in their 2010 National Intimate Partner and Sexual Violence Survey (NISVS) that bisexual people experienced very high lifetime prevalence rates of sexual violence. Nearly half of bisexual women (46%) have been raped in their lifetime and nearly half of bisexual men (47%) have experienced sexual violence in their lifetime.³⁸ Hate motivated violence can often take the form of sexual violence, and given the high rates of sexual violence against bisexual people, NCAVP will continue to research the intersection of hate motivated sexual violence against bisexual communities.

³⁸ *Ibid.*

DISPROPORTIONATELY SEVERE VIOLENCE AGAINST LGBTQ AND HIV-AFFECTED PEOPLE OF COLOR

LGBTQ and HIV-affected people of color experienced disproportionately severe violence in 2014, which remains consistent with findings from NCAVP since 2010. People of color were 2.2 times more likely to experience physical violence, 1.4 times more likely to be injured and 1.7 times more likely to require medical attention. People of color were also more likely to experience police violence and public harassment.

Black LGBTQ and HIV-affected communities were 2.0 times more likely to experience physical violence, 1.4 times more likely to experience threats and intimidation, and 2.0 times more likely to experience discrimination. These findings suggest that Black LGBTQ and HIV-affected people may be at increased vulnerability for severe hate violence.

Latin@ LGBTQ and HIV-affected communities were 1.5 times more likely to experience discrimination, 1.5 times more likely to be injured, 1.7 times more likely to experience police violence, and 1.5 times more likely to experience hate violence at the workplace.

LGBTQ and HIV-affected people of color face racism as well as homophobia, biphobia, and transphobia which may contribute to their unique experiences of violence as well as increased rates of poverty and job discrimination. LGBTQ and HIV-affected people of color may face barriers in accessing support from both LGBTQ and HIV-affected communities and from larger communities. Many LGBTQ and HIV-affected organizations have strived to address these barriers by creating specific program for LGBTQ and HIV-affected people of color. NCAVP member, In Our Own Voices, is an organization by and for LGBTQ and HIV-affected people of color which has an anti-violence program. Community United Against Violence (CUAV) in San Francisco, also conducts targeted outreach to low-income LGBTQ and HIV-affected people of color and centers their programming on LGBTQ and HIV-affected people of color. These model programs can support LGBTQ and HIV-affected people of color in unique and specific ways to address the disproportionate impact of violence against LGBTQ and HIV-affected people of color.

DISPROPORTIONATELY SEVERE VIOLENCE AGAINST YOUTH AND YOUNG ADULTS

NCAVP's 2014 data showed that youth and young adult LGBTQ and HIV-affected communities are disproportionately vulnerable to physical and more severe forms of violence, and young LGBTQ and HIV-affected survivors are more likely to be injured and require medical attention as a result of hate violence incidents. However, apart from NCAVP data, there is a dearth of research that explores the intersection of hate violence and young LGBTQ and HIV-affected communities. There is data that suggests that young people in general are the most common targets of hate violence attacks³⁹ and LGBTQ and HIV-affected youth may be even more vulnerable due to pervasive societal homophobia, biphobia, and transphobia. Additionally, NCAVP members also find that a substantial number of LGBTQ and HIV-affected youth survivors are often disproportionately affected by poverty and homelessness. Research suggests that as many as 40% of homeless youth identify as LGBTQ.⁴⁰ Youth also have access to fewer economic resources and may be less empowered to seek support. Ultimately, institutional and interpersonal homophobia, biphobia, and transphobia combined with a lack of resources contribute to the disproportionate impact of hate violence on youth and young adults.

Additionally, LGBTQ youth face severely disproportionate hate violence in schools and universities in the form of bullying and harassment and NCAVP data finds that schools and universities are a common site for the occurrence of hate violence incidents. The National School Climate Survey conducted by GLSEN in 2011 demonstrated that 82% of LGBTQ youth had been bullied about their sexual orientation and 44% felt unsafe due to their gender identity.⁴¹ For LGBTQ and HIV-affected youth and young adults not in school there are still many intersecting issues that may explain the disproportionate impact of violence in their lives. The intersecting oppressions that youth and young adult communities experience, due to their age, race, and LGBTQ and HIV-affected identities, contributes to an increased likelihood of experiencing poverty, lowered academic achievement, homelessness, and unemployment. Employment barriers can begin early in life for LGBTQ and HIV-affected youth, because they may face homophobic, biphobic, and transphobic violence at school or home. Low-income LGBTQ and HIV-affected youth and LGBTQ and HIV-affected youth of color who face homophobia, biphobia, or transphobia at home are more likely to become homeless or become part of the foster care system because of limited economic resources within their families and communities⁴². The higher dropout rates for LGBTQ and HIV-affected youth can create later employment barriers for LGBTQ and HIV-affected youth and young adults, resulting in engagement, either by choice or by coercion, in underground economies such as sex work and selling illegal drugs for survival; all of which may increase the risk of

³⁹ Nolan, James J., III, *Op cit.*

⁴⁰ Durso, L.E., & Gates, G.J. (2012). *Serving Our Youth: Findings from a National Survey of Service Providers Working with Lesbian, Gay, Bisexual, and Transgender Youth who are Homeless or At Risk of Becoming Homeless*. Los Angeles: The Williams Institute with True Colors Fund and The Palette Fund.

⁴¹ Kosciw, J. G., Greytak, E. A., Bartkiewicz, M. J., Boesen, M. J., & Palmer, N. A. (2012). *The 2011 National School Climate Survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools*. New York: GLSEN.

⁴² Ray, N. (2006). *Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness*. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless.

experiencing sexual violence.⁴³ All of these types of employment can increase the risk of violence and can create barriers for LGBTQ and HIV-affected youth to seek assistance and support from law enforcement for the violence they experienced. A 2015 study showed that almost 50 percent of LGBTQ homeless youth had traded sex for money or resources and many LGBTQ youth are arrested as a result of actual or perceived engagement in sex work.⁴⁴ The intersection of multiple barriers and oppressed identities greatly contribute to the severe forms of hate violence faced by LGBTQ and HIV-affected communities.

NCAVP data also suggests that LGBTQ and HIV-affected young adults are 2.2 times more likely to experience police violence. Historically, LGBTQ and HIV-affected communities have been a target for police violence and have been criminalized by law enforcement in the United States. The modern LGBTQ rights movement in the United States started in response to police violence. Data also suggests that police and law enforcement agencies disproportionately target LGBTQ and HIV-affected youth and young adults, especially youth of color.⁴⁵ It should come as no surprise then that LGBTQ and HIV-affected youth, many of whom live their lives at the intersection of race, poverty, homelessness, and LGBTQ identities, are disproportionately targeted by law enforcement – further exacerbating the experience of hate and bias motivated violence that already permeates their lives by those charged to maintain their safety.

Responses to violence faced by LGBTQ and HIV-affected youth and young adults must not only address the interpersonal violence in the lives of LGBTQ and HIV-affected youth but also address this violence at the highest institutional levels. Prevention services and programs, access to resources, anti-bullying policies and campaigns, and access to education and employment free from discrimination and harassment must all be operationalized to end the severe violence faced by these communities.

⁴³ Bryan N. Cochran, Angela J. Stewart, Joshua A. Ginzler, and Ana Mari Cauce. *Challenges Faced by Homeless Sexual Minorities: Comparison of Gay, Lesbian, Bisexual, and Transgender Homeless Adolescents With Their Heterosexual Counterparts*. American Journal of Public Health: May 2002, Vol. 92, No. 5, pp. 773-777.

⁴⁴ Dank, Meredith. *Surviving the Streets of New York: Experiences of LGBTQ Youth, YMSM, and YWSW Engaged in Survival Sex*. Urban Institute, Feb. 2015.

⁴⁵ *Ibid*

TRENDS IN OFFENDER INFORMATION

A majority of hate violence offenders in 2014 were under 30 and men. 36% of offenders were between 19-29 years of age, and 5.53% of offenders were 15-18. The overwhelming majority of offenders were men (63.76%). Policymakers and funders should support violence prevention programs targeted at young men to reduce homophobia, biphobia, and transphobia. Current governmental responses to hate violence solely rely on criminal prosecution and penalty enhancements for offenders. However, this approach does not reduce or prevent violence. Currently our nation incarcerates more people than any other nation, and the majority of incarcerated people are young men of color. Many organizations currently advocate for a dramatic shift in our society's approach to preventing and ending violence beyond criminal prosecution, to prevention research and engagement of young men of color to reduce and end violence.

A substantial percentage of survivors also knew their offenders (43.22%) in 2014, with landlord/tenant/neighbor, employers/coworkers, and relatives consisting of the highest percentage of known offenders. These findings highlight that hate violence is not always committed by strangers on the street, but that LGBTQ and HIV-affected people are also at risk of violence from people in their lives at their workplace, in and around the home, and involving landlords, tenants, and neighbors.

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 D.C. Office of Human Rights (OHR) in Washington D.C., aim to increase understanding and respect for the transgender and gender non-conforming communities, decrease incidents of discrimination and increase reporting of discrimination to OHR. 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 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.

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 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.⁴⁶ LGBTQ and HIV-affected anti-violence programs should work with educational institutions to create curricula that increase LGBTQ and HIV-affected cultural 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

⁴⁶ Lambda Legal: School-to-Prison-Pipeline. Accessed from <http://www.lambdalegal.org/blog/lambda-legal-helps-senate-address-school-to-prison-pipeline> in May, 2015.

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 the 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, instead focusing on education and prevention efforts. 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.

Within many communities, religious leaders have the ability to influence the thoughts and actions of their constituents. LGBTQ affirming religious leaders have the power to reduce homophobia, biphobia, and transphobia and reduce violence against LGBTQ and HIV-affected communities.⁴⁷ Some anti-LGBTQ and anti-HIV rhetoric from religious leaders actually exhorts violence against LGBTQ and HIV-affected communities, but even when the violence is not specifically encouraged, many NCAVP members and survivors 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.

LGBTQ and HIV-affected communities should continue to build alliances with other communities impacted by hate violence, to increase awareness and shared understanding of how multiple forms of oppression may intersect.

As documented in this report, LGBTQ and HIV-affected people living at the intersections of various race, gender, sexual orientation, and immigration statuses are vulnerable to specific forms or expressions of violence. LGBTQ and HIV-affected community based hate violence initiatives should take the lead in forming coalitions and partnerships with groups or organizations working to address racism, sexism,

⁴⁷ Accessed from http://www.unityfellowshipchurch.org/mainsite/?page_id=7 in March, 2015.

xenophobia, disability justice, and more in an effort to address hate violence in all its forms. NCAVP member organizations and affiliates such as the New York City Anti-Violence Project, Survivors Organizing for Liberation (formerly the Colorado Anti-Violence Program), and Community United Against Violence (CUAV) all maintain local alliances with non-LGBTQ and HIV-affected specific organizations working to address violence motivated by race, gender identity, immigration status, and ability to more effectively address the nebulous impact of surviving multiple forms of violence.

FOR SUPPORTING LGBTQ AND HIV-AFFECTED SURVIVORS OF HATE VIOLENCE

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

Organizations should work to support LGBTQ and HIV-affected survivors 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. 2014 saw a number of organizations led by and for transgender people of color form, and anti-violence organizations should collaborate with and support these organizations. 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 of violence possess lived experiences that provide invaluable perspectives for prevention efforts and innovative strategies to support survivors. 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 support them to have leadership roles within the organization. Another model is the New York City Anti-Violence Project's Community Action Committees (CAC) focused on hate violence and intimate partner violence. CAC 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 resources and funding for LGBTQ, HIV-affected, and anti-violence organizations that utilize community accountability or transformative justice models.

As previously discussed, many LGBTQ and HIV-affected survivors 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 leadership development 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 survivors of violence. These strategies involve training participants in how to prevent, identify, and de-escalate violence, and support survivors without relying on law enforcement.

Anti-violence organizations should prioritize outreach to the most marginalized members of LGBTQ and HIV-affected communities, including elders, people living with HIV, immigrants, transgender men, and Native American, Middle Eastern, Asian Pacific-Islander, and South Asian people, to reach and meet the needs of under-represented LGBTQ and HIV-affected survivors of hate violence. NCAVP's 2014 data lacks representation from LGBTQ and HIV-affected elders, HIV-positive survivors, immigrants, LGBTQ and HIV-affected Native American, Asian Pacific-Islander, and South Asian survivors, 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. Programs like the TransJustice of the Audre Lorde Project can be used as models by other organizations. TransJustice is for and by transgender and gender non-conforming people of color, and seeks to mobilize communities and allies into action about issues affecting the community like job access, housing, education, and trans-sensitive healthcare.⁴⁸ Anti-violence organizations should prioritize reaching out to LGBTQ and HIV-affected elders, HIV-affected communities, LGBTQ and HIV-affected immigrants, 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.

⁴⁸ TransJustice. Accessed from <http://alp.org/tj> in May, 2015.

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.

These organizations and institutions are in regular contact with community members and have opportunities to collect data and document experiences of LGBTQ and HIV-affected survivors. Organizations that do not collect comprehensive information on sexual orientation and gender identity should implement new protocols to collect this information, including a range of non-binary options that reflect the diversity of LGBTQ and HIV-affected people's ways of identifying, and should seek technical assistance and training to do so. NCAVP's 2014 data highlights that only 54.20% of survivors contacted the police. Some of these survivors prefer to seek support from community-based organizations. 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 a major identities like transgender and HIV-affected populations within the LGBTQ and HIV-affected community. All data collection must be inclusive of LGBTQ and HIV-affected communities to have an accurate picture of the issues affecting the community.

CONCLUSION

2014 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. An increase in reports to police and other law enforcement suggest that that law enforcement may be better serving LGBTQ and HIV-affected survivors. Amidst this progress, NCAVP finds the stark fact that deadly violence disproportionately impacts transgender women of color, specifically Black transgender women, and that the severity of physical and sexual hate violence against LGBTQ and HIV-affected communities increased in 2014. Taken together, these facts illuminate that anti-LGBTQ homicides may have decreased overall, but transgender people of color remain victims of anti-LGBTQ violence at a higher rate than White and cisgender LGBTQ survivors and victims, largely because of the intersectional identities they navigate with regards to gender and race. The media and policymakers have finally begun to recognize that anti-LGBTQ and HIV-affected violence is a critical issue, which is evidenced by the increased media attention given to anti-LGBTQ hate violence and the prominence of transgender activists such as Janet Mock and Laverne Cox. However there continues to be much work to do to address the alarmingly high rates of violence against LGBTQ and HIV-affected communities.

This year's report reveals an increase in the severity of anti-LGBTQ and HIV-affected hate violence. Similar to our findings in the last few years, 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, ageism, classism, anti-immigrant bias, homophobia, transphobia, biphobia and heterosexism create can impact various LGBTQ and HIV-affected people differently.

This report serves as a reminder of the ongoing and necessary work conducted by community-based organizations, policy makers, funders, first responders, healthcare professionals, law enforcement, and community members in order to ensure safety for all of our communities. NCAVP urges LGBTQ and HIV-affected communities and our allies to continue these conversations about marginalized identities and violence. LGBTQ and HIV-affected survivors of violence face multiple roadblocks to support and reporting, which emphasize the need to continue to invest in research, reporting, and outreach to communities that remain underrepresented in data collection and analysis. In this time of unforeseen political access and cultural visibility, NCAVP will continue to advance its mission, and continue the work of reducing violence and increasing safety for LGBTQ and HIV-affected communities.

2014

LOCAL SUMMARIES

BUCKEYE REGION ANTI-VIOLENCE PROJECT (BRAVO)

Ohio Statewide

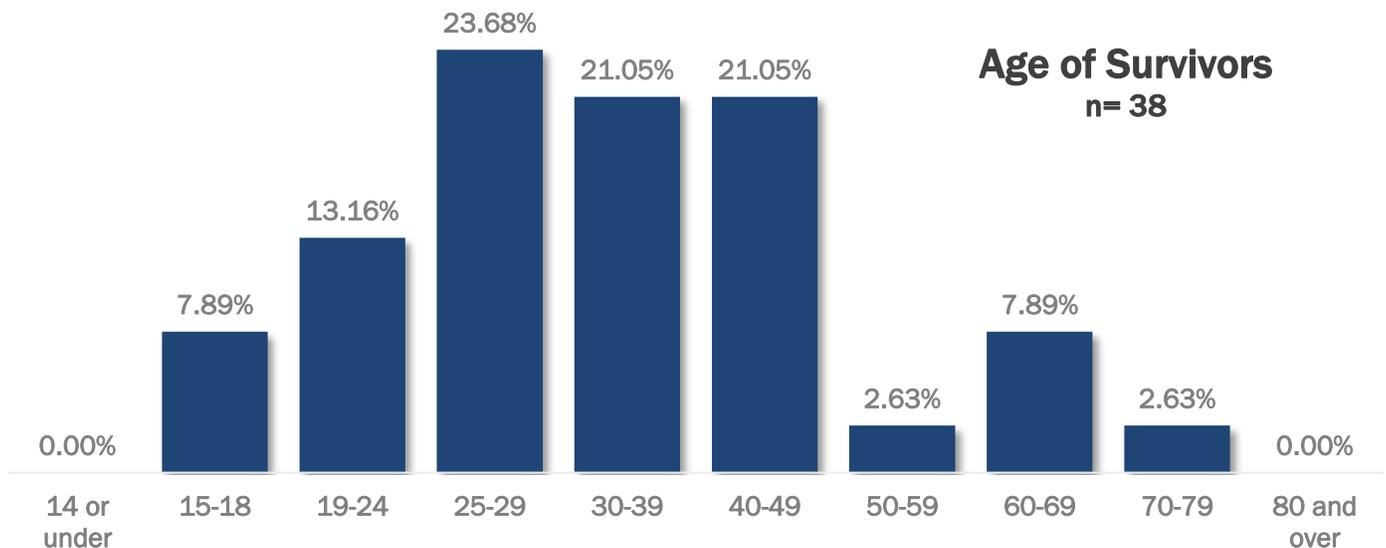
BRAVO works to eliminate violence perpetrated on the basis of sexual orientation and/or gender identification, intimate partner violence, and sexual assault through prevention, education, advocacy, violence documentation, and survivor services, both within and on behalf of the Lesbian, Gay, Bisexual, and Transgender communities.

Services include anonymous, confidential crisis support and information via a helpline with trained staff and volunteers, documentation of hate crimes & intimate partner violence, hospital and legal advocacy, public education to increase awareness of hate motivated violence and same sex intimate partner violence and to increase knowledge about support services available, education of public safety workers, and service and health care providers to increase their competency to serve LGBTQ survivors/victims and/or their families and communities.

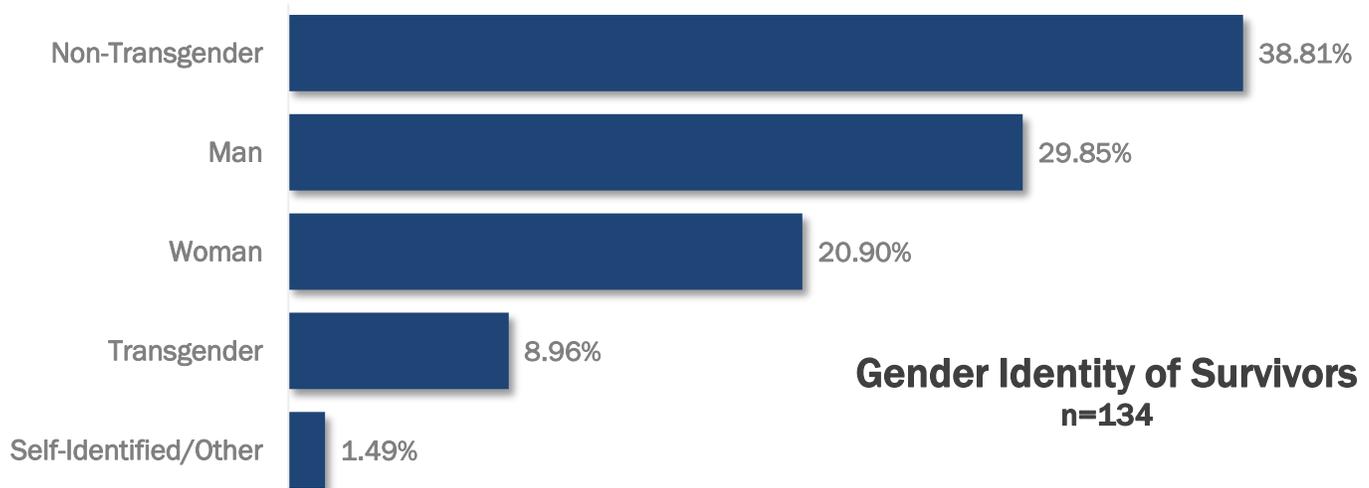
BRAVO is committed to our belief that the best way to reduce violence is to foster acceptance. Only by making people and institutions aware of these issues and “demystifying” LGBTQ people and the issues that LGBTQ people face can we assure quality services to survivors and ultimately reduce the incidence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

2014 marks the twenty-fifth year that BRAVO and NCAVP have documented hate violence statistics in Ohio. BRAVO responded to 71 hate violence incidents in 2014, which is a 29% decrease in reports from 2013 (100 incidents reported). It is unclear if this represents an actual decrease in incidents, or a decrease in survivors reporting violence. Continued outreach is necessary to ensure that LGBTQ survivors are aware of the resources available, particularly in rural and exurban areas.

BRAVO documented an 80% increase in reports of hate violence from individuals aged 25-29 years old (9 individuals) and a 50% increase in reports from individuals aged 60-69 years old (3 individuals). Overall, the majority of hate incidents reported in 2014 were from survivors ranging in ages 25-40 years old (25 individuals). Similar to previous years, more men (40) than women (28) reported hate violence incidents to BRAVO. There was a 9% increase in reports from transgender survivors (12 incidents). The majority of survivors identified as gay (32; 43%), 8 survivors identified as lesbian (10.81%), 2 as queer (2.7%), 1 as bisexual (1.35%), and 5 as



heterosexual (6.76%). Consistent with previous years, the majority of survivors reporting hate incidents to BRAVO were White (45.12%; 37 individuals). There was a 33% decrease in reports from Black/African American survivors (6 individuals).



In 2014 the majority of hate/bias violence incidents reported to BRAVO occurred at places where victims were living and working. There was a 17% increase in reports of incidents occurring at the victims private residence (27 reports) and a 7% increase in reports of workplace harassment (15 incidents), There was a 50% decrease in incidents (4 incidents) reported occurring at or near an LGBTQI identified venue and a 40% decrease in incidents occurring on the street or public area (12 incidents).

The majority of survivors and victims (46; 64%) knew the offender(s) of the hate violence incidents. Employers and coworkers were the most commonly reported known offender (14; 30%). Incidents in which a relative or family member was the offender increased by 80% (9 incidents), accounting for almost 20% of all incidents with a known offender. Landlords, tenants, and neighbors accounted for 15% of known offenders (7 incidents). There was approximately a 67% increase in incidents occurring in the context of pick up violence (5 incidents), continuing a trend from 2013.

Often incidents of hate and bias motivated violence are more violent and severe, resulting in more extensive injuries compared to other crimes. BRAVO responded to 2 hate motivated homicides and 1 suicide in 2014. Additionally, 19 incidents involved physical violence (5% increase from 2014), and 2 incidents involved sexual violence. BRAVO documented a 171% increase in the number of incidents in which the victim was injured (19 incidents). The number of incidents involving a weapon remained consistent from previous years (7 incidents). There was a 10% increase in victims requiring medical attention (11 individuals), of which 2 victims did not receive medical attention that was necessary, however there was a 100% increase in the number of victims requiring inpatient hospitalization for medical care for physical injuries (4 individuals).

There was an 11% increase in incidents that involved discrimination in the workplace or in accessing public accommodations (30 incidents), and a 100% increase in incidents involving sexual harassment (4 incidents) and stalking (4 incidents). There was also a 50% increase in incidents of theft (6 incidents) and 80% increase in incidents of vandalism (9 incidents).

Of the 25 survivors that interacted with law enforcement, 14 survivors provided feedback about their experiences with the police. Half of those survivors (7 individuals) reported courteous police attitudes, while

21% (3 individuals) reported indifferent attitudes, and 28% reported hostile attitudes (4 individuals) from the police. Twenty survivors reported the incident of hate/bias violence to the police, and in 19 cases (95%), police took the complaint, which represents an increase from 2013, of which approximately 79% of reports made to police were taken as complaints by law enforcement (22 out of 28 reports). BRAVO has been training cadets going through the Columbus Police Academy for 25 years, and has been expanding training for other law enforcements agencies about working with LGBTQ survivors of violence.

COMMUNITY UNITED AGAINST VIOLENCE

San Francisco, CA

Founded in 1979, CUAV works to build the power of LGBTQ (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.

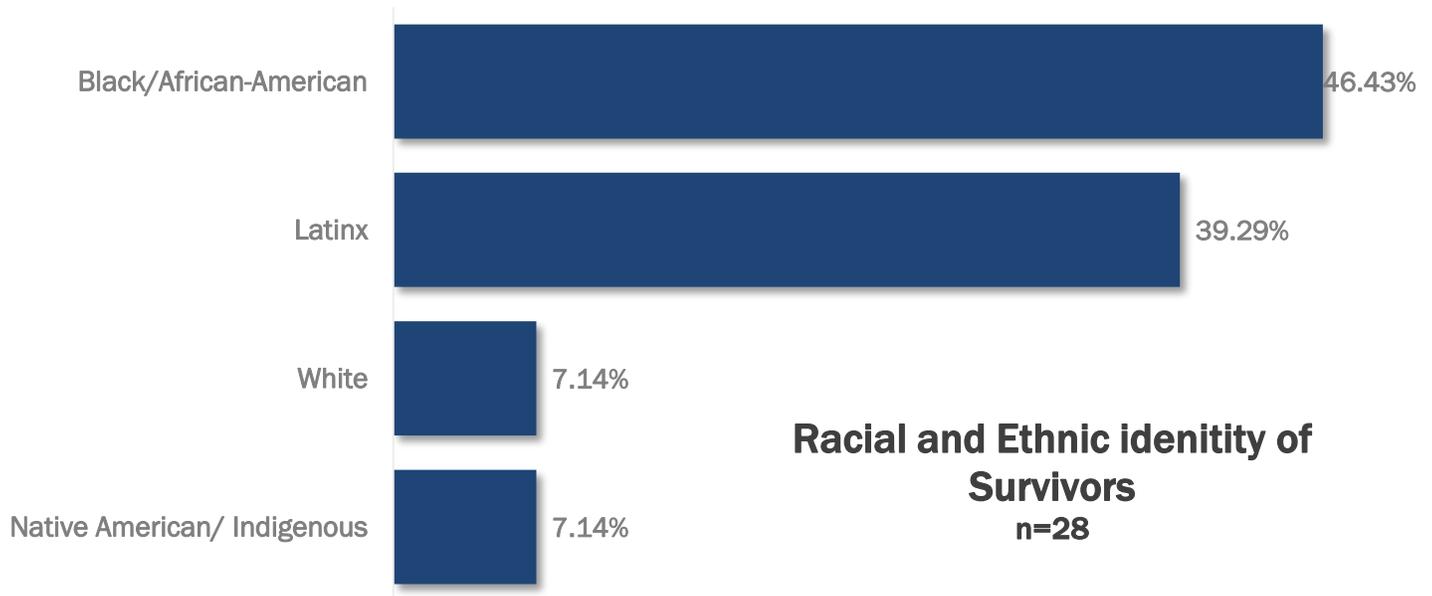
CUAV strives to shift society's dominant anti-violence approach from punishment to increased support for everyone. We support survivors in learning to trust their intuition and the wisdom in their bodies. As LGBTQ people, we look at the history of violence and oppression in our communities to address the root causes of isolation, anxiety, and depression survivors experience as they simultaneously navigate healing from individual acts of hate violence.

On a day-to-day basis, we provide emotional support to individual survivors and engage in cultural change activities to explore what helps people sustain lasting transformation. In an effort to center those most impacted by lethal hate and domestic violence – namely transgender women of color and extremely low-income LGBTQ people – CUAV combines an advocacy-based counseling approach with group support and political education training to foster a collective practice of self-determination.

As an organization, CUAV staff practice shared leadership to grow our muscles in holding both power and accountability.

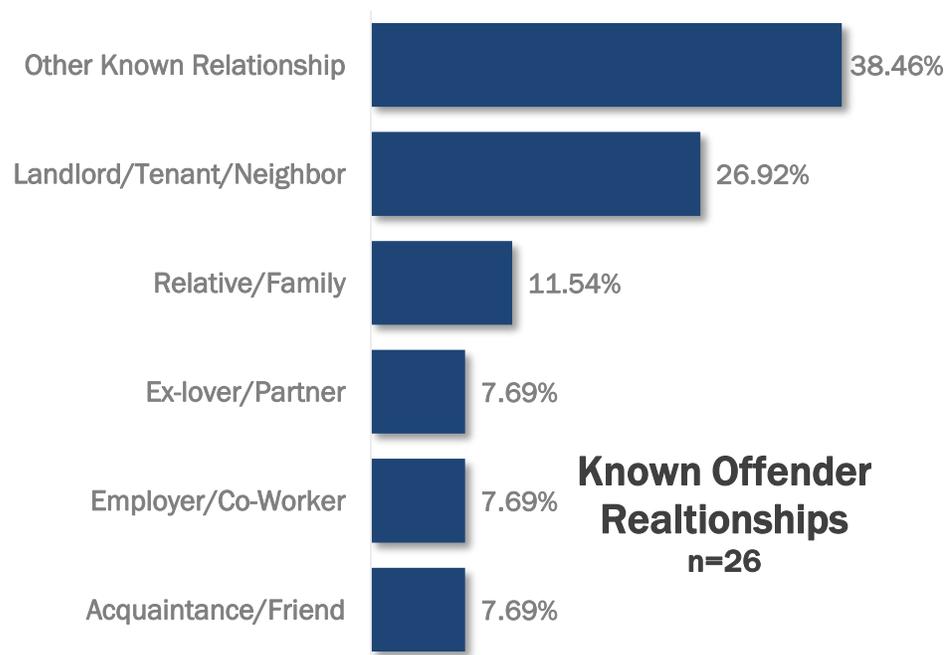
Overall, CUAV saw a decrease in reports of anti-LGBTQ hate violence in 2014, from 110 reported incidents in 2013 to 49 reported incidents in 2014. This drastic decrease is likely due to several factors. As there are now more LGBTQ-specific programs or departments sprinkled throughout agencies within the San Francisco Bay Area, LGBTQ people are less likely to report their experiences of violence to one unified source. For example, data from the San Francisco Unified School District demonstrates that LGBTQ young people are reporting high rates of physical and sexual violence within dating relationships and bullying at school. A recent needs assessment survey conducted by a coalition of LGBTQ-programs also demonstrates the prevalence of violence against the LGBTQ community, with fewer than 9% of respondents saying they had never experienced any physical violence, sexual violence, or harassment. Another possible reason for the decrease is due to a decrease in outreach specifically for our Safety Line. In previous years, all outreach materials have included our Safety Line number as a way to access support. As the organization has continued to move away from this model, we have seen a corresponding decrease in general reports. This reflects CUAV's intentional shift from a breadth model to a depth model where we provide more services for people in more complex situations.

Within the data on reports of anti-LGBTQ violence, CUAV received a 600% increase in reports from people who disclosed having any kind of disability. This increase is likely due to better training on tracking mechanisms within the organization.



The majority of survivors who disclosed their race/ethnicity fall within the umbrella term people of color (46% Black/African-American, 39% Latinx). As CUAHV has worked to strengthen partnerships with organizations that serve Black and Latinx communities, we have continued to receive steady reports of anti-LGBTQ violence. This shift to intentionally build partnerships with non-LGBTQ specific Black and Latinx communities reflects the organization’s responsiveness to national trends in anti-LGBTQ hate violence murder data. Particularly as Black and Latinx community institutions are increasingly moving due to rising rents, CUAHV is working to help maintain what little safety net there is here in the city.

Landlords, tenants, and neighbors represented the most common known group of people causing harm (27% of all known offenders). This data matches up with the most common site type; people most often reported experiencing violence in a private residence (49%). Harassment (22%) and threats or intimidation (21%) continue to be the most common reported forms of violence that survivors experienced in 2014. This data lines up to present a distressing picture reflected in non-LGBTQ communities as well; communities of color in San Francisco are being harassed by landlords and neighbors in an attempt to garnish more profit from rental properties.



EQUALITY MICHIGAN

Detroit, MI

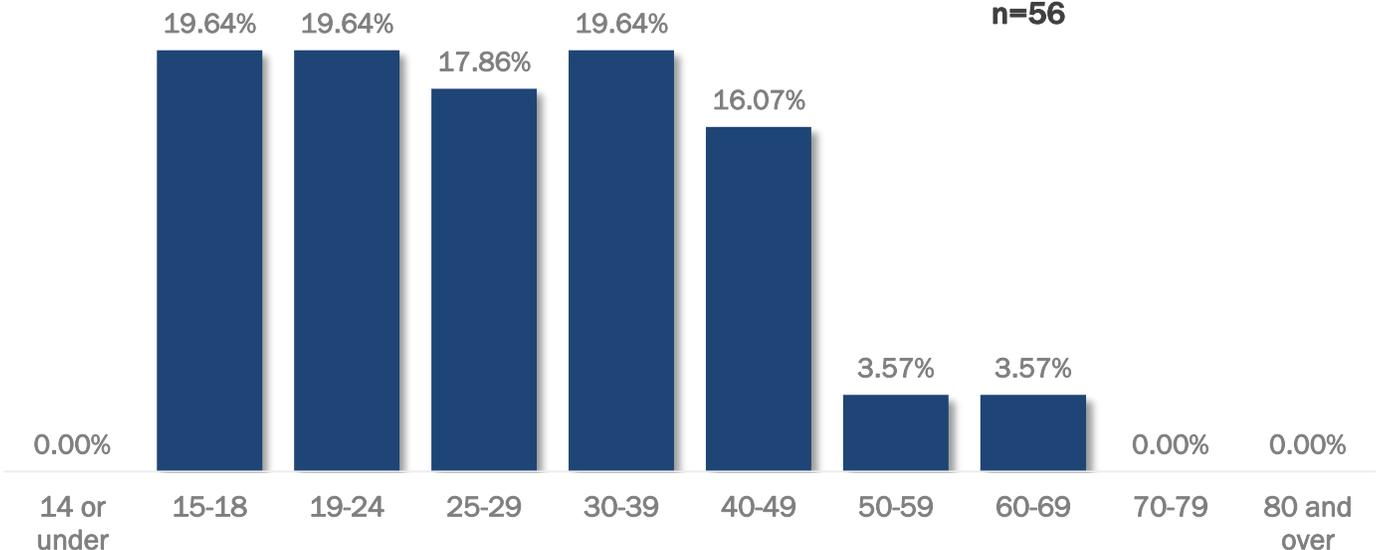
Equality Michigan works to achieve equality, equity, and dignity for all Michigianians regardless of sexual orientation, gender identity, gender expression, or HIV status. Our Department of Victim Services is committed to working toward creating safer and more affirming communities for all LGBTQ and HIV-affected people.

Based in Detroit, with an office in Lansing, Equality Michigan is the only statewide organization dedicated to providing personal support and advocacy to those who have endured anti-LGBTQ and anti-HIV violence and discrimination, and our Policy Department works directly with legislators in Lansing to change the laws that allow this culture to permeate. Equality Michigan is a founding member of the NCAVP, and has worked for more than 20 years to end anti-LGBTQ and anti-HIV violence and discrimination. Our Department of Victim Services responds to reports of harassment, violence, and discrimination. We offer 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+ Michigianians affected by violence and discrimination may reach us through a toll-free helpline, e-mail, our website, and via Facebook.

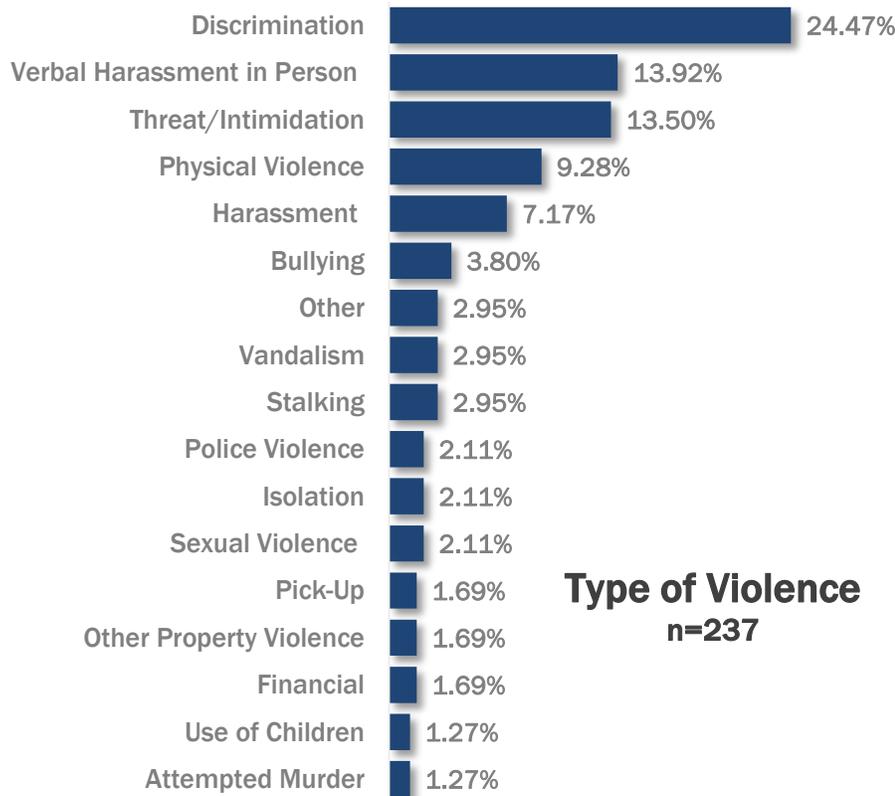
Equality Michigan saw a slight decline in reporting survivors from 2013 to 2014 (100 to 91). The majority of survivors who reported incidents of hate violence were below the age of 30, with a dramatic increase of 450% from survivors between the ages of 15-18 (from 2 to 11), and a 100% increase in survivors between the ages of 25-29 (from 5 to 11) compared to 2013. Incidents reported by those over the age of 30 showed a marked decrease from 2013 (42 in 2013; 24 in 2014). White and Black survivors were nearly identical in number and accounted for the majority of reports (70.53%; White 35.79%; Black 34.74%) in 2014, which is striking in both the decrease of White survivors and the increase in Black survivors as compared to 2013 (White survivors decreased by 27.66% while Black survivors increased by 106.25%). Latin@, Arab/Middle Eastern, and Asian/Pacific Islander survivors remained largely unchanged, while Native/Indigenous survivors increased from 0 to 2 from 2013 to 2014.

Age of Survivors

n=56



As with previous years, the majority of reports were made by those who identify as cisgender (54; down from 62 in 2013) and gay (36; up from 33 in 2013). Unlike previous years, however, male identified survivors were not the majority. Rather, there were an equal number of survivors who identified as male or female (41 each). Sadly, the number of transgender survivors once again surged in 2014 by 70.59% (from 17 in 2013 to 29).



Similar to years past, the bulk of reports we received involved harassment and discrimination. However, there was a striking increase in ultra-violent bias motivated crimes: a 200% increase in attempted murders of transgender women of color (from 1 in 2013 to 3 in 2014), a 69.23% increase in physical violence (from 13 in 2013 to 22 in 2014), a 200% increase in bullying (from 3 in 2013 to 9 in 2014), and reports of police violence increased from 0 in 2013 to 5 in 2014. Additionally, incidents of sexual violence increased by 25% (4 to 5), stalking increased by 16.67% (6 to 7), threats and intimidation increased by 39.13% (23 to 32), and vandalism increased by 133.33% (3 to 7) from 2013.

Equality Michigan closed out 2014 mourning the loss of Jay Ralko, a 22 year old transgender man who had gone missing on December 10. We worked closely with his mother to help bring him home safely, but regrettably his body was found in his truck on December 23 in a Wal-Mart parking lot by his mother. Jay had committed suicide.

2014 was a brutal and vicious year for LGBTQ Michigianians, reflecting the national trends for LGBTQ people. It is a stark reminder that, though marriage equality is quickly winning the hearts and minds of mainstream Americans, the majority of LGBTQ people are simply not safe. Transgender women, especially transgender women of color, are disproportionately impacted by the most heinous acts of violence. Transgender people, especially transgender youth, are disproportionately at risk of committing suicide. Our communities are under attack, not just by citizens, but by lawmakers and law enforcement. We must do better. Equality Michigan is committed to creating a more tolerant Michigan through increased education of mainstream organizations, including law enforcement and service providers, targeted outreach to our own most marginalized community members, and building collaborative relationships with community partners across Michigan.

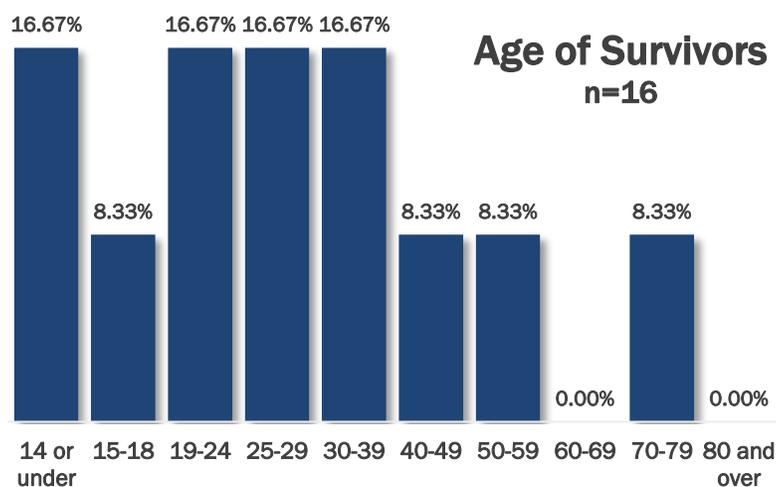
KANSAS CITY ANTI-VIOLENCE PROJECT

Missouri & Kansas

The Kansas City Anti-Violence Project (KCAVP) provides dedicated services to lesbian, gay, bisexual, transgender and queer (LGBTQ) youth and adults, throughout Missouri and Kansas, who have experienced trauma, violence, harassment or neglect. Through direct advocacy, professional training and community education, we work to prevent and respond to domestic violence, sexual violence and hate crimes.

Since 2003, KCAVP provides emergency assistance, support, and services to LGBTQ victims of violence, including domestic violence, in metropolitan Kansas City and support and counseling across Kansas and Missouri. KCAVP fills gaps in service for LGBTQ victims of violence and acts as a gateway to services that LGBTQ people may not have access to or are unable to access due to systemic homophobia. KCAVP advocates for victims and educates service providers and the community about the differences LGBTQ people face when they are victims of violence in their community or they are victims of violence because they are part of (or perceived to be part of) the LGBTQ community. KCAVP also acts as a social change agent in the community to increase knowledge about LGBTQ domestic violence, sexual assault, and hate crimes.

Overall, the numbers of incidents KCAVP responded to involving bias motivation in 2014 increased by 78% compared to 2013 (9 to 16). This could be due to increased outreach and visibility of the organization over the past year, in addition to an expanded geographic service area to statewide in Missouri and Kansas from mostly the Kansas City Metropolitan area. KCAVP also increased the staff capacity to work with younger victims and saw a 66% increase in the number of youth (24 and younger) seeking help.



KCAVP continues to play a prominent role in the case of Dionte Green, a young gay African American man in late 2014 which garnered significant media attention possibly increasing KCAVP's visibility in communities of color. It may also be possible that the Green murder increased the visibility of queer people of color in Kansas City, leading to an increase in violence against LGBTQ people in general. In addition with the Michael Brown case in Ferguson, Missouri, hate crimes and police brutality have become more prominent issues not only in the media, but in the communities. That visibility may have empowered other victims to seek services when bias motivated incidents happened.

There was a 150% increase in the number of reported attacks and incidents of bias-motivated violence against the transgender community in 2014, as compared to the previous year. KCAVP also continues to see an increase

in physical violence used in these incidents (166%), more people injured during bias incidents (200% increase), and those that seek medical attention (150% increase).

This is the second year in a row where KCAVP has not responded to any incidents of police brutality. This could be from the training and work KCAVP has done training law enforcement in the region, as well as KCAVP's coalition work with other LGBTQ advocacy agencies and law enforcement to address the historically mistrustful relationship of the LGBTQ community and law enforcement. KCAVP did see an increase in police misconduct when law enforcement responded to incidents, including the arrest of a survivor.

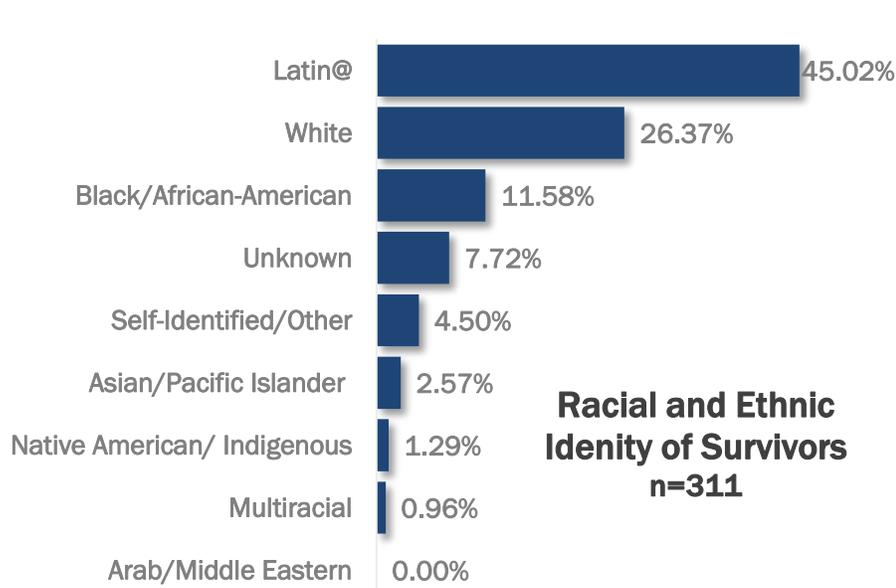
LOS ANGELES LGBT CENTER

Los Angeles, CA

Established in 1988 by the Los Angeles LGBT 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 intervention, advocacy with law enforcement and the criminal justice system, court accompaniment, attorney consultations and referrals, assistance with victims' compensation, and referrals to mental health care and other social services.

The AVP has a specific focus on serving the transgender community and immigrant communities, which experience disproportionate levels of hate violence and discrimination. Historically, the transgender community is the most marginalized and underserved population within LGBTQ communities in the U.S. In order to raise awareness and cultural competency around transgender issues, the AVP has proactively provided trainings to law enforcement, as well as to a wide array of service providers and community organizations.

In 2014, a total of 311 survivors were served by the AVP. This marks a 27.5% decrease in the number of cases reported from 2013. Two factors primarily contributed to the decrease. First, unlike previous years, the AVP precluded data from community-based surveys collected at pride festivals throughout LA. County. Thus, the total of 311 cases only reflects individuals who specifically contacted and sought assistance from the AVP. Second, the AVP experienced a temporary decrease in staffing during 2014 and therefore less capacity to conduct intakes and serve clients.



Latin@ survivors made up 45.0% 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 26.4% of total reports while Black and African American survivors and victims made up 11.6% of total reports. Asian and Pacific Islanders, Multiracial, Native American, Arab and Middle Eastern, and other/self-identified races made up a total of 17.0%, each less than 4.5% of total survivors and victims.

In 2013, the AVP continued to see a disproportionate impact of violence on LGBTQ people of color, with the most severe cases of violence and discrimination perpetrated against transgender women, gay men, and LGBTQ immigrants. As a result, the AVP is continuing to focus outreach on these populations in our community.

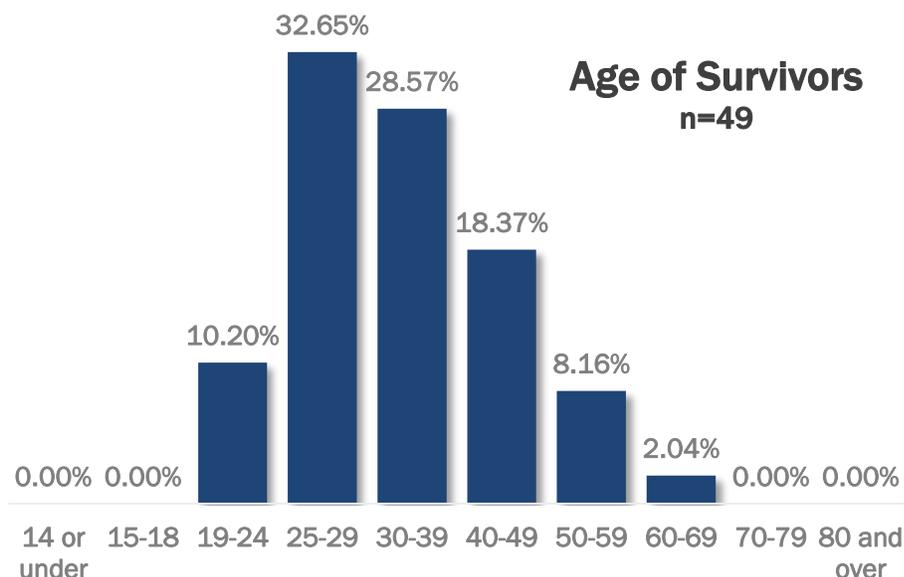
THE MONTROSE CENTER

Houston, Texas

The Montrose Center empowers our community, primarily gay, lesbian, bisexual, and transgendered 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 and bias crimes by providing counseling, case-management, advocacy, and hospital, police, and court accompaniment. The Montrose Center continues to work with Houston’s FBI Hate Crimes Unit, the Houston Police Department and the Harris County Sheriff’s Department to deal with hate and bias crimes in the Houston area. The Montrose Center has incorporated a hate and bias group in three area high schools to deal with bullying of students for LGBTQ issues as well 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 the 2014 year the Montrose Center saw 49 new clients of hate and bias crimes. The Montrose Center saw a huge increase in these numbers mainly due to school outreach. Of those clients, 33 were high school students dealing with issues of bias in the schools mainly due to gender identity of sexual orientation. The incidents were impacting the students enough that the schools



contacted the Montrose Center to do special groups for their students. Of the ten that weren’t students four were between 19 to 24, four were between 25 to 29, three were between 30 to 39, four were between 40 to 49 and one was between 50 to 59. Of those not in school 100% identified hate and bias incidents as being related to anti-LGBTQ issues. While most of those in school were due to sexual orientation or gender identity the Montrose Center did have several that were due to racial bias. The Montrose Center offers services under its hate crimes grant to survivors of any hate or bias crime, and most clients come in mainly due to issues of sexual orientation and gender identity. This may be caused by the Montrose Center being known for its specialty in working with the LGBTQ population. Gender identity was also a number that increased by a wide margin. This year the Montrose Center saw nine clients identifying as transgender or questioning. The Montrose Center believes this number increased due to the students not being as afraid to deal with gender identity issues.

NEW YORK CITY ANTI-VIOLENCE PROJECT

New York, NY

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. NYC 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 is a social change, non-profit organization that provides both immediate interventions when violence occurs, and helps survivors of violence become advocates of safety through community organizing and volunteer opportunities. NYC AVP was founded in 1980 in reaction to neighborhood incidents of violence against LGBTQ and HIV-affected people, and the failure of the criminal legal system to respond. Today, NYC AVP provides free and confidential assistance to thousands of people who have experienced all forms of violence each year, at ten intake sites across all five boroughs of New York City, as the largest LGBTQ and HIV-affected anti-violence program in the country.

In fiscal year 2014, NYC AVP answered over 3,000 hotline calls—an average of one call every 3 hours—providing LGBTQ culturally competent crisis intervention, safety planning, counseling, advocacy, information and referral to survivors of all forms of violence, and reached over 57,000 people in one-to-one distribution of safety tips, safer sex supplies, and information on AVP's services, at least once per month in every borough, including in neighborhoods where incidents of violence have been reported. NYC AVP also reached 6,800 professionals through 250 trainings through our Training Institute. NYC AVP coordinates the National Coalition of Anti-Violence Programs (NCAVP), which publishes two national reports, including this one, on violence within and against LGBTQ and HIV-affected communities and operates national training and technical assistance centers to support mainstream organizations around issues of violence within and against LGBTQ and HIV-affected communities. NYC AVP also coordinates the New York State LGBTQ Domestic Violence Network.

NYC AVP conducts onsite intake across the five boroughs, at community based organizations and is an onsite partner at all established New York City Family Justice Centers (FJC), in the Bronx, Brooklyn, Queens, and Manhattan, and we hope in the coming years to be at the upcoming FJC in Staten Island, as well as satellite FJCs in Bedford Stuyvesant, Brooklyn, and East Harlem, Manhattan. We are also located at BOOM!Health's Preventative and Harm Reduction Centers in the Bronx, Adolescent AIDS Program in the Bronx, Bronx Community Solutions alternative to incarceration program in the Bronx and the Staten Island LGBT Center.

Overall Reports

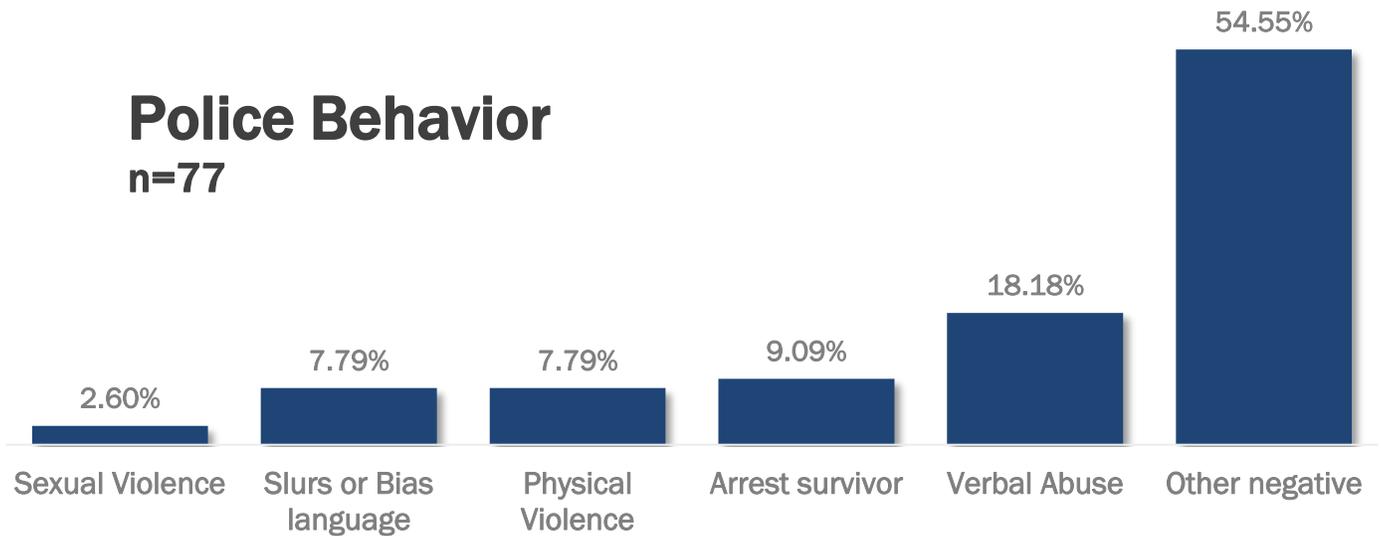
In 2014, the NYC AVP supported a total of 361 new LGBTQ and HIV-affected hate violence survivors, which represents a 39% decrease from 594 served in 2013. Homicides were also down to zero in 2014, from 3 in 2013. This decrease brings reports back to 2012 levels. Reports in 2013 spiked during a year when several high profile incidents of deadly hate violence occurred in New York City, including the homicide of Mark Carson and Islan Nettles, during which NYC AVP ran a *Reporting Violence Ends Violence* campaign, which dramatically increased the number of people reaching out to NYC AVP. The 2014 decrease in clients reporting hate violence may be related to fewer high profile incidents and zero homicides in New York City and the corresponding drop in

media and public attention to hate violence, as increased media and public attention often corresponds with increased reporting to NYC AVP. Additionally in 2014, staff transitions at NYC AVP during the reporting period meant that NYC AVP was only fully staffed in our Client Services department for 3 of 12 months, which significantly decreased our capacity to serve as many clients as the previous year. Notably, some staff transition happened within our programming specifically targeted to transgender and gender non-conforming (TGNC) communities of color (COC).

Police Behavior

Police Reporting and Misconduct

Reports to NYC AVP reveal increased police misconduct against LGBTQ and HIV-affected survivors reported in 2014, when in 51% of incidents reported, survivors indicated that they interacted with police. This represents a 26% decrease in frequency of survivors reporting they interacted with the police (from 267 in 2013, to 197 in 2014), likely due to the fact that overall reports went down. However, there was actually a proportional increase of 10% of reports from survivors that they interacted with the police, from 57% in 2013, to 67% in 2014, which includes situations in which the survivor contacted the police as well as those in which another person contacted the police. Reports of police misconduct, including police violence, increased by 60%, from 48 in 2013 to 77 in 2014, which included some significant increases. Reports of “other negative” responses from the police increased by 950%, from four in 2013, to 42 in 2014, while reports of verbal abuse by police increased by 133% (from six in 2013, to 14 in 2014), and reports of physical violence from police increased by 50%, to six reports (8%) in 2014, from four in 2013. Some types of misconduct decreased, including 8% of survivors reported slurs or bias language from police, down from 13% in 2013, and 3% report sexual violence from police (two, down slightly from three in 2014).



The increase in reports of police violence and other misconduct reflect increasingly visible concerns around and awareness of increased policing and violence impacting marginalized communities across the nation. On the local level these increases may reflect NYC AVP’s ongoing work with Communities United for Police Reform with the passage of the Community Safety Act in 2013 and now the efforts to pass the Right To Know Act, to make police more responsive and accountable to LGBTQ and HIV-affected communities of color in NYC. NYC AVP is also a member of the Access to Condoms Coalition, which continues to address and seek reform of a

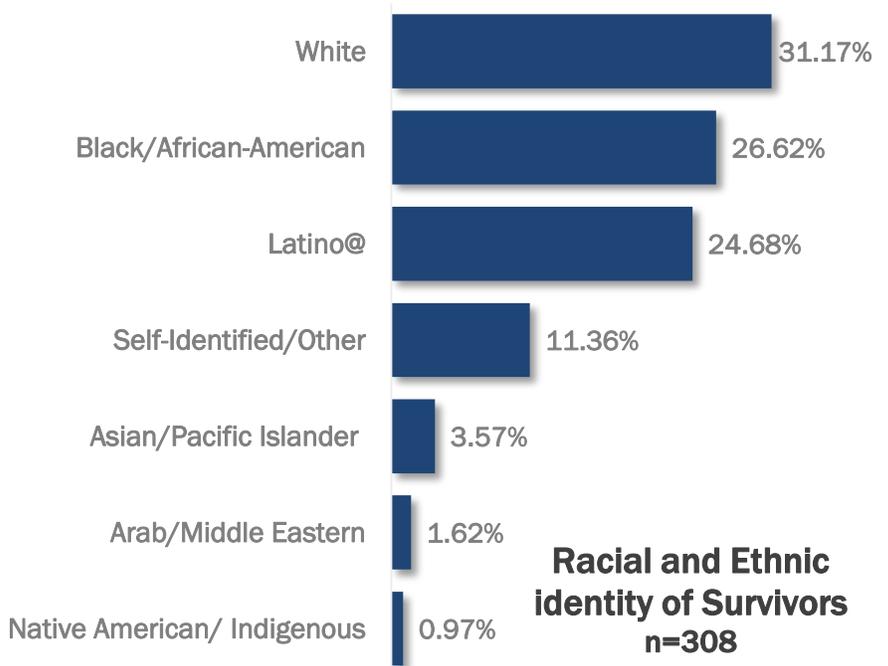
New York State law that allows for condoms to be used as evidence in prostitution-related arrests, which increased profiling of LGBTQ communities under “stop and frisk.” practices, which once again target TGNC communities’ risk of being profiled and criminalized as sex workers, while also facing violence and discrimination from the NYPD. When carrying condoms is criminalized, LGBTQ or HIV affected people, particularly those who identify as people of color and/or youth, tell NYC AVP they feel unsafe carrying condoms and therefore less able to negotiate safer sex. NYC AVP’s work around police reform is in direct response to what we hear from our communities about their negative and violent experiences with policing, reflected in the data in this year’s report.

Most impacted identities

NYC AVP’s data supports the overall national trends represented in this report, including disproportionate rates of reporting from transgender and gender non-conforming (TGNC) communities and communities of color, with a slight increase in reports from those identified as Black/African American. Additionally, a higher proportion of people reporting to NYC AVP shared that they are living with a disability.

Race & Ethnicity

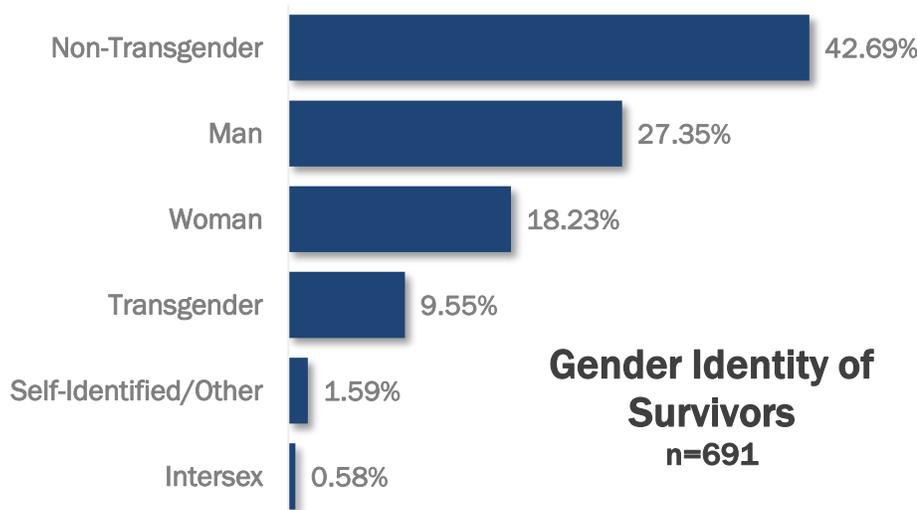
Of the survivors who shared their race/ethnicity with NYC AVP ⁴⁹ the majority (72%) identified as people of color, consistent with reports in 2013. Also consistent with last year, the most reported race/ethnicity was Latin@ (26%, down from 33% in 2013), and more than a quarter of reports in 2014 (28%) identified as Black/African American/African Heritage, a slight increase from 24% in 2013. This increase may be connected to AVP organizing efforts within the local and national anti-police violence and Black Lives Matter movement which seeks to highlight the impact that police violence has on people of color, particularly Black people. We also saw increases in other groups, specifically: a slight increase in reports from Native American/Indigenous People (from 0% in 2013 to 1% in 2014; an 86% increase in reports from Self-identified survivors, from 5% in 2013 to 9% in 2014; a 25% increase in reports from clients who identify as being Arab/Middle Eastern (from <1% last year, to 2% in 2014); and a 10% increase in reports from Asian/Pacific Islander, including South Asian survivors. NYC AVP saw a decrease in reports from survivors who identified their race/ethnicity as multi-racial, from 6% in 2013, to 0% in 2014, because this category has been moved into self-identified.



⁴⁹ 73% of survivors reporting to AVP in 2012 did share their race/ethnicity, while 27% did not disclose their race/ethnicity.

Gender Identity

In 2014, the 361 new hate violence survivors served by NYC AVP identified across the gender identity spectrum, choosing 678 total identity categories, demonstrating the fluidity with which LGBTQ and HIV-affected people identify their gender across an evolving spectrum of identity. Overall, 12% survivors of hate violence identified as outside the gender binary, as transgender or gender non-conforming (TGNC), or self-identified, down from 19% in

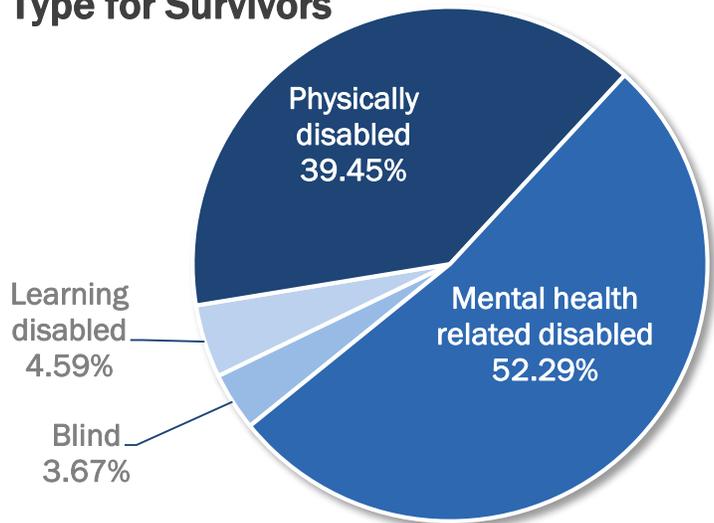


2013, but consistent with national data. As mentioned above, this decrease in reaching TGNC people likely reflects a lack of staff capacity due to staff transition in NYC AVP’s TGNC-specific programming. In 2015 we have been able to staff up that programming, and continue to deepen this necessary work, and have also worked to successfully increase TGNC survivor engagement in our community organizing work, including our Community Action Committees and our Speakers’ Bureau.

Disability of survivors of violence

In 2014, the number of those reporting a disability to NYC AVP went down, as all reports went down, but of those sharing their ability status with NYC AVP, the proportion of reports from survivors who identified as living with a disability increased by 71%, to 65% in 2014, from 38% in 2013. The most reported type of disability was related to mental health issues (51% of those who reported a disability), followed by those living with a physical disability (39% of those who reported a disability).

Disability Type for Survivors n=155



This increase highlights the intersection of ableism with other marginalization like transphobia, homophobia, biphobia, racism, classism, ageism, and anti-immigrant bias, which can increase vulnerability to violence, and create obstacles to service, all of which necessitates services that are responsive to unique needs for survivors of violence living with disabilities. This increase may be related to our deepening partnerships with organizations serving people with disabilities associated with their mental and physical health. NYC AVP partners with local organizations working with people living with disabilities, providing and receiving mutual training and technical assistance, to ensure that LGBTQ and HIV-

affected survivors of violence who are living with disabilities have access to culturally competent, responsive, and affirming services that are tailored to their unique needs. The increase in reports from those living with mental health disabilities may also reflect NYC AVP's increasing focus on trauma-informed work, that recognizes that LGBTQ and HIV-affected survivors of violence may have experienced trauma associated with the violence they are reporting, and need supports and services that focus on recovery from that trauma. We will continue to refine our approach and strengthen linkages to continue serving this vulnerable community.

Other Demographics

LGBTQ and HIV-affected Immigrants:

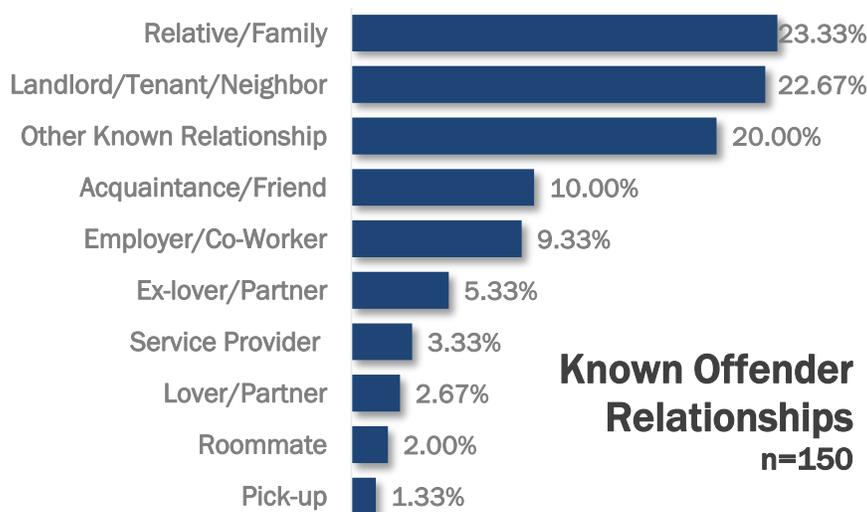
The majority of survivors reporting hate violence to AVP in 2014 identified as U.S. citizens (87%), up from 81% in 2013. Of those who shared their immigration status, we saw a 40% decrease in the proportion of survivors who identified as permanent residents, down from 4% to 2%, and a 39% decrease in the proportion of survivors who identified as undocumented, from 10% in 2013 to 6% in 2014. This decrease may be related to the disruption of service, specifically in our community-based programming that includes onsite intake in all five boroughs, including our targeted work with TGNC communities of color, which includes extensive work with trans Latin@ women. AVP's programs in every borough bring these marginalized survivors culturally competent services tailored to their unique needs and now that we are fully staffed in 2015, we expect our numbers to increase in the next year to at least our previous levels.

Sexual Orientation:

In 2014, the sexual orientation of those reporting to NYC AVP was consistent with what we saw in 2013, with 54% of survivors identifying as gay; down slightly from 58% in 2013; 17% identifying as heterosexual, up slightly from 15% in 2014, which may be attributed to our focused work with TGNC communities, specifically TGNC folks who identify as heterosexual, as well as with heterosexual cisgender people who have experienced hate violence based on the perception of their identity; 12% identify as Lesbian, a slight decrease from 14% last year; 7% as Bisexual, up slightly from 5% in 2013; and 6% self-identified, who choose to identify their sexual orientation outside the above categories, up slightly from 4% in 2013; 3% identified as Queer, consistent with last year; and also consistent with last year, <1% were questioning or unsure of their sexual orientation.

Offender Relationship

In 2014, the 361 new survivors of hate violence reporting to NYC AVP shared information on 555 offenders, indicating that many survivors experience violence from multiple offenders in a single or serial incident. Twenty-seven percent of offenders were known to survivors, while 73% were not. Of those offenders who were known to survivors, consistent with last year, the most common relationship was Relative/Family, at 23%, up slightly from 20% last year, followed closely by Landlord/Tenant/Neighbor, in 22% of



cases, down from 28% last year, and Employer/Co-Worker at 9%, down from 10% in 2014. Of those offenders unknown to survivors, 82% were identified as strangers, down slightly from 87% in 2013, and 18% were identified as police officers, up from 13% in 2013.

This data underscores that LGBTQ and HIV-affected people face hate violence from those they know well, and those they do not, in their homes, on the streets, and from the police, those that are designated to protect them.

Conclusion

In 2014 we continue to see that there is power in community to create safety, but that systemic oppression and institutional violence continue, particularly for marginalized LGBTQ and HIV affected communities, including transgender and gender non-conforming communities and LGBTQ communities of color, and that LGBTQ and HIV affected people living with disabilities are more vulnerable to hate violence, and face increased barriers in accessing services and support. This underscores the need for LGBTQ and HIV affected culturally specific direct services, community organizing, and public advocacy programming, to continue to build safety and support within and for all of our communities.

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. Through our collaboration with mainstream organizations, LGBTQ organizations, and working with NCAVP we hope to end the exclusivity of LGBTQ services for survivors of violence so that our community members can go to any organization, any first responder, any place, and feel safe and heard. Through our direct service work, trainings, legal department, as well as our client led community action work, we work to make the world safer for LGBTQ and HIV-affected people, by motivating our communities and allies, because together, we can end violence.

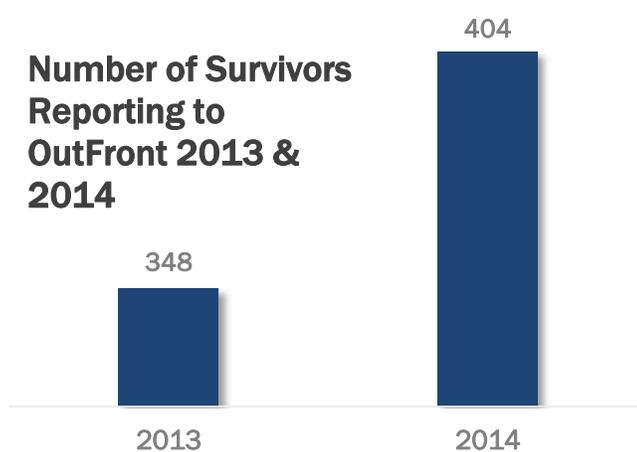
OUTFRONT MINNESOTA

Minneapolis, MN

OutFront Minnesota is the state's leading advocacy organization working with lesbian, gay, bisexual, transgender, queer and allied people (LGBTQA). Our mission is to create a state where LGBTQA people are free to be who they are, love who they love, and live without fear of violence, harassment or discrimination. We envision a state where LGBTQA individuals have equal opportunities, protections and rights. We are working toward the day when all Minnesotans 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 LGBTQA and HIV-affected crime victims and their friends/families throughout Minnesota. We believe that social change occurs when we work to prevent violence from occurring within and against our communities through education and increased visibility; help survivors of violence find their own paths to healing and empowerment through the provision of safe and effective advocacy support services; and, work with other organizations to create a strong network of well-trained and supportive service providers throughout Minnesota. To attain equity for LGBTQ and HIV-affected survivors, we approach this through an intersectional lens that locates and honors the many layered identities within our communities.

Overall, Outfront's Anti-Violence Program saw an increase of 16.09% and served 404 survivors of hate and bias violence compared to 348 in 2013. OutFront observed a large drop in survivors in the 19-24 age range (-94.81%), which suggests that we need to do additional outreach in the college and young adult communities in the state of Minnesota. Outfront also saw a large increase in survivors in the 50-59 age range (100%) and in the 60-69 age range (214%). Part of Outfront's strategic plan that was developed in 2014 involves a greater focus on LGBTQ seniors, and so these numbers support the idea that there is a need in the 50-69 age range.



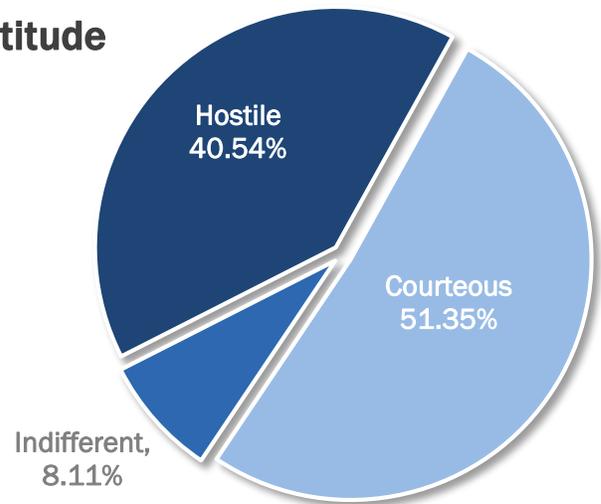
OutFront also saw a 300% increase in the number of survivors that identified as “queer” and a 792% increase in survivors who did not disclose their specific orientation. In the interests of good data collection, we need to make sure interns and volunteers are asking for orientation in all their calls, and only marking undisclosed if the survivor does not want to disclose (the huge increase indicates a concern with accurate data collection of sexual orientation). As far as gender identity, OutFront saw a 166% increase in transgender survivors.

OutFront saw a decrease in the number of incidents involving a weapon – down by 89.04%, but again increase in the number of incidents where it was not known if a weapon was involve – and increase of 185.71%. However, there was an increase of 85.37% in the number of incidents requiring medical attention.

One of the most significant increases OutFront saw in terms of hate or bias violence was a large increase in the use of drugs- a staggering 3100% increase (from one survivor in 2013 to thirty-two in 2014). We also saw an increase in LGBTQ venues (300%) and the workplace (118.18%) as the site of hate and bias incidents.

In terms of police conduct there was both improvement, and increased reports of misconduct. There was an increase of 322% in terms of survivors who reported a courteous response from officers. However there was an increase of 500% for survivors who reported a hostile response, as well as a 900% increase in any reporting of officer misconduct. This data relating to police interactions indicates a need for greater collaboration and training with Minnesota police departments.

Police Attitude n=148



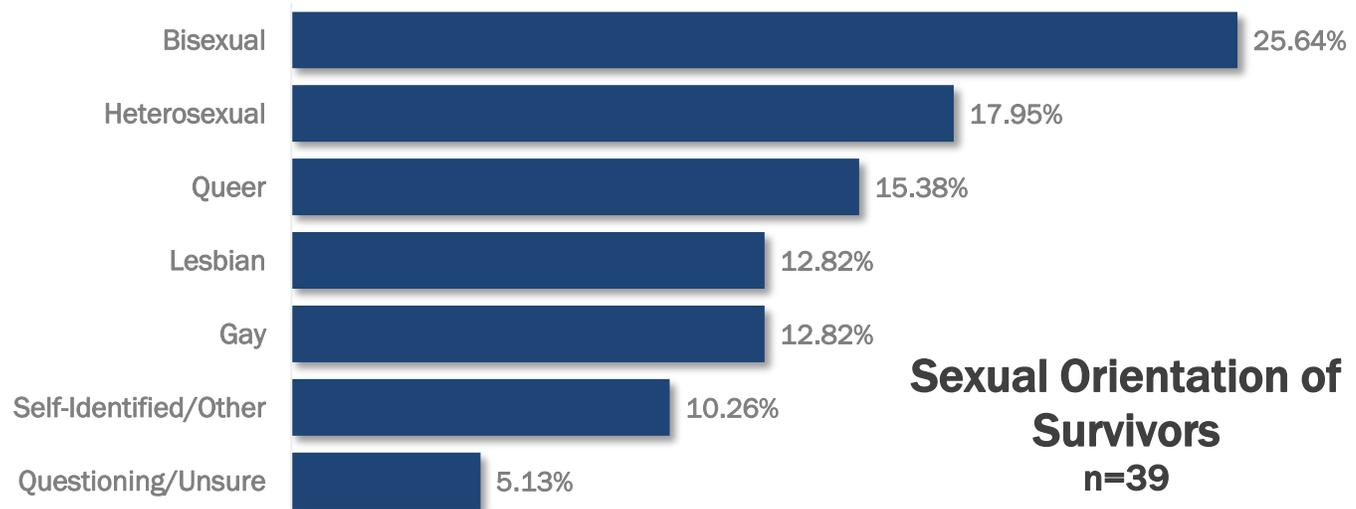
SAFESPACE PROGRAM @ PRIDE CENTER OF VERMONT

Burlington, VT

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 (LGBTQ), and HIV affected people.

SafeSpace, a program of the Pride Center of Vermont (formerly RU12? Community Center), is a statewide program and the only program in Vermont that provides anti-violence services specifically for LGBTQ and HIV-affected communities. We provide information, support, referrals, and advocacy to LGBTQ and HIV-affected 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.

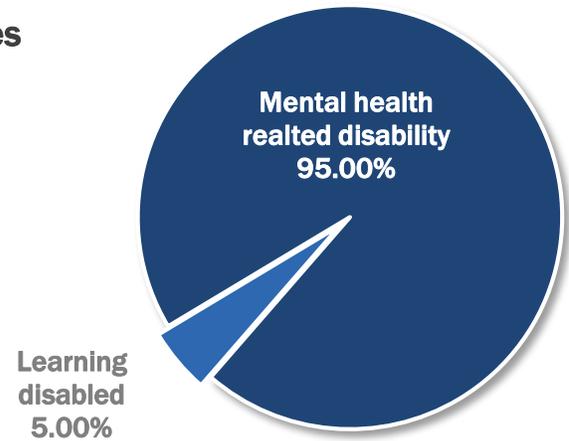
Part of an agency wide effort in 2014, SafeSpace worked on creating greater accessibility for our communities to our services which resulted in new and stronger partnerships across Vermont including training work for elders, Police Academy training, and a stronger online presence including our report violence online option. This meant that our hate violence reporting increased slightly from 44 in 2013 as compared to 47 in 2014.



The number of gay identified survivors increased by 88% in 2014, from eight in 2013 to 15 in 2014 and queer identified survivors increased by 200% in 2014 from three in 2013 to nine in 2014. These increases most likely reflect our continued efforts at integrating programs at Pride Center of Vermont.

There was a 58% increase in the number of survivors with disabilities reporting bias motivated violence from 12 in 2013 to 19 in 2014. Safespace expansion of the LGBTQ Individuals with Disabilities Support Network included increased collaborations with various larger disability agencies and various community based mental health organizations, and increasing direct outreach to the disability community.

Disability Types for Survivors n=20



SafeSpace is learning that outside of Chittenden County, where Pride Center of Vermont is based, survivors are not reporting incidents of hate violence. This may be a result of a perception that the center serves the Burlington area alone. In response, SafeSpace is building a strategic base of communications by expanding education and outreach opportunities outside of Chittenden County. Through these efforts we expect to see an increase in the number of reports from other regions of the state.

THE VIOLENCE RECOVERY PROGRAM AT FENWAY HEALTH

Boston, MA

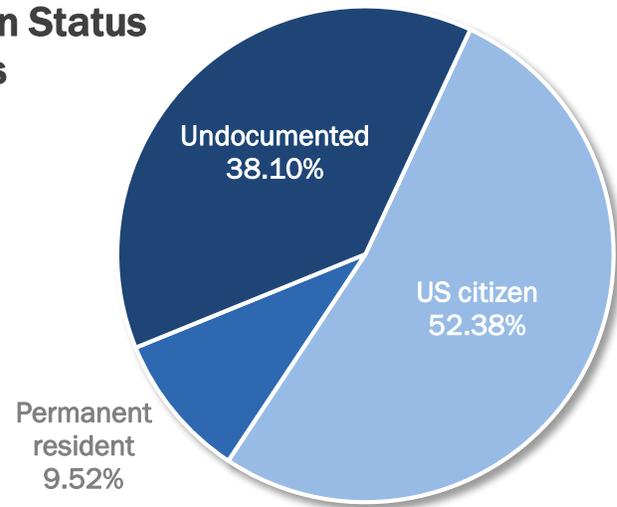
The Violence Recovery Program (VRP) at Fenway Health was founded in 1986 and provides counseling, support groups, advocacy, and referral services to lesbian, gay, bisexual, and transgender and queer (LGBTQ) survivors of bias crime, intimate partner violence, sexual assault, and police misconduct. The VRP mission is to provide services to LGBTQ survivors who have experienced interpersonal violence as well as information and support to friends, family, and partners of survivors, raise awareness of how LGBTQ hate violence and intimate partner violence affects our communities through compiling statistics about these incidences, and ensure that LGBTQ survivors 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 LGBTQ people and neighborhood residents receive comprehensive behavioral health and medical care, regardless of ability to pay. The VRP currently serves 175 LGBTQ clients per year who are survivors of recent violence in the forms of intimate partner violence, sexual assault, hate violence 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 navigating the criminal justice and legal systems. The staff of the VRP assists survivors to file reports and restraining orders; connects survivors to LGBTQ-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 psycho-educational, support and activity-based groups. In addition to delivering services directly to LGBTQ survivors, VRP staff provides training and education to healthcare providers, legal and law enforcement personnel, students and community groups.

In 2014, the Violence Recovery Program documented 28 incidents of anti-LGBTQ bias/hate violence, considerably fewer incidents than were documented in 2013. This decrease in documented incidents may be attributed to the fact that the VRP went through a major transition of staff in 2014, during which time outreach efforts and service delivery slowed. This number of incidents, however, is comparable to the number of documented hate violence incidents from two years ago in 2012.

Most noteworthy in 2014 was the number of undocumented LGBTQ survivors who reported hate violence to the VRP: 29% of reported incidents of hate violence came from survivors who had fled their countries of origin following persecution that targeted them because of their LGBTQ identities. These undocumented survivors aimed to seek asylum in the United States fearing for their lives and for the safety of their families back home after they had experienced threats, violence and torture. Most sought counseling through the VRP to help them to cope with trauma-reactive symptoms that interfered with their daily functioning; all sought advocacy to assist them to connect with medical care, basic resources and legal representation for their asylum cases. Asylum-seekers service in the VRP in 2014 came from Guatemala, Russia, Uganda and Botswana.

Immigration Status of Survivors n=21

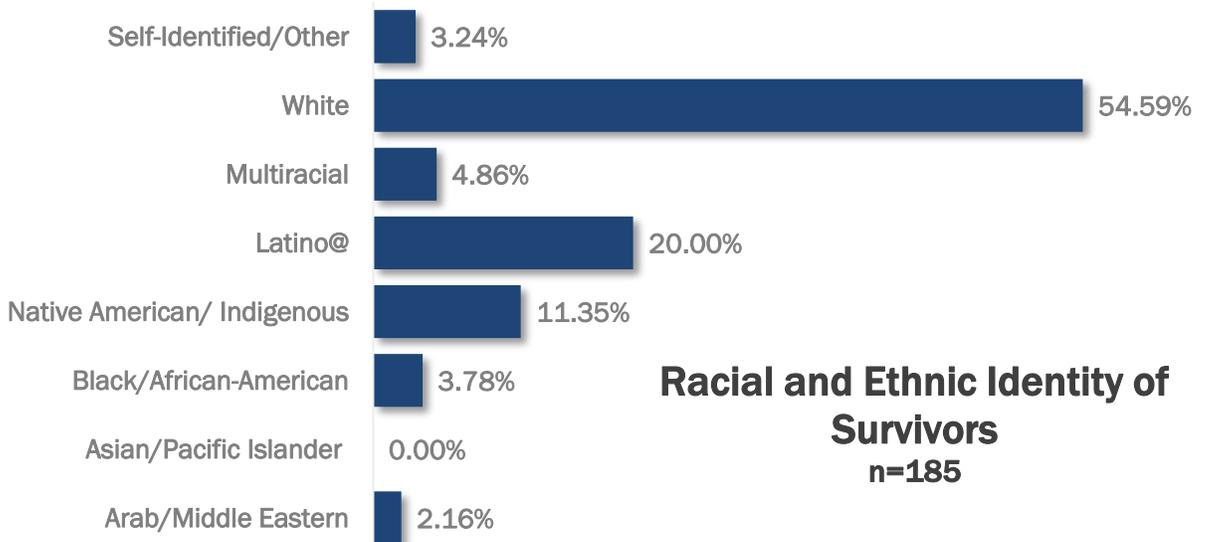
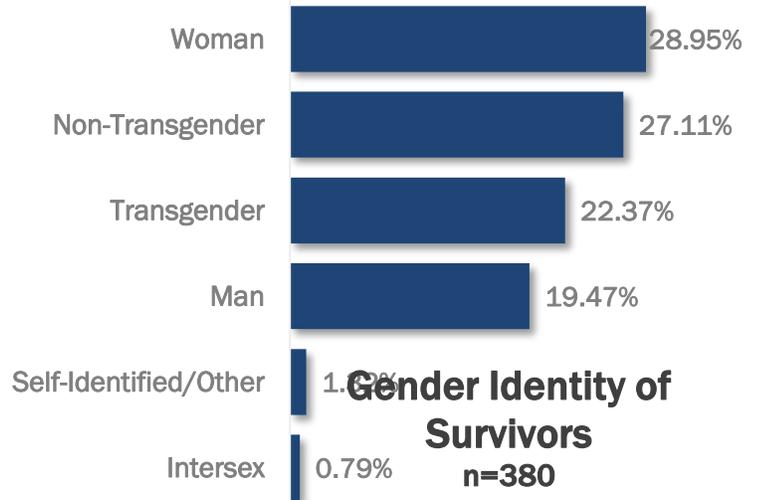


WINGSPAN ANTI-VIOLENCE PROJECT

Tucson, AZ

The Wingspan Anti-Violence Project is an LGBTQIA&HIV+ anti-oppression activist program of the Southern Arizona AIDS Foundation. The Wingspan AVP works to transform the legal, social and cultural landscape in the Southwest regarding violence against LGBTQIA&HIV+ people. Through a 24-Hour Bilingual Crisis-Line, community organizing and a walk-in office, the Wingspan AVP performs crisis intervention, advocacy, grass roots organizing and community education in order to support primary, secondary and potential survivors of recent and past incidents of domestic violence, sexual assault, hate violence, discrimination, police brutality and institutional violence. The Wingspan AVP rejects any and all homonationalist tendencies within the LGBTQIA&HIV+ movement and strives to link the struggle of LGBTQIA&HIV+ people with all other movements against oppression and violence.

In 2014, the Wingspan AVP saw a dramatic increase in Hate Violence, from 59 incidents in 2013 to 189 incidents in 2014, a 220.34% increase. This included a 2025% rise in transgender survivors reporting incidents of Hate Violence: in 2014, 85 survivors were transgender, 45%, whereas 103 of survivors were cisgender, 55%. In addition, although the ratio of people of color and undocumented people dropped in 2014, there was also a dramatic in the number reporting incidents of Hate Violence. Finally, of those who disclosed their ability status, 54.55% of survivors reporting hate violence were differently abled, the vast majority of which, 92.31%, had a psychiatric different ability. These increases are due to multiple factors. Firstly, there are political factors in Arizona that make this state a particularly dangerous state, and secondly, there are Wingspan AVP administrative factors that have led to a more accurate analysis of data.



First, the political situation in Arizona is a major factor in the increase of Hate Violence. Arizona law has consistently legitimized Hate Violence against LGBTQIA&HIV+ people and has restricted survivors from seeking aid. Reflected in the law SB 1062, a law which would have allowed businesses to refuse service to LGBTQIA&HIV+ people based on the owner's religious conviction, Arizona is one of the most biased states in the nation. Although the law was vetoed by the former Governor Jan Brewer, after extensive organizing efforts in Tucson and Phoenix plus the threat of losing the Super Bowl, there is no law which prohibits discrimination and thus there have nevertheless been many cases of discrimination. 48.68% of incidents involved some form of discrimination. In addition, although Jan Brewer did veto SB 1062, she did not veto SB 1070, Arizona's notorious "show me your papers" law, which has increased institutional violence and caused fear of law enforcement among undocumented populations. This is reflected in the 9.5% of survivors who disclosed their documentation status were either undocumented, permanent residents or another documentation status other than US citizen. However, regardless of documentation status, 10.58% of incidents were motivated by an anti-immigrant bias. Furthermore, laws against sex workers such as Phoenix's Offenses against Morals law, Manifestation of Prostitution, and Tucson's Loitering law, have promoted anti-sex worker violence by both clients and police. 12 of 189, 6.35% of hate violence incidents reported were motivated by an anti-sex worker bias. Nevertheless, regardless of the vast quantity of Hate Violence incidents occurring in Arizona, Collectively, these policies have legitimized Hate Violence against LGBTQIA&HIV+ people and have led to far more incidents.

Secondly, in the past, the Wingspan AVP did not regularly categorize incidents as Hate Violence unless the incident was categorized as a Hate Crime and the perpetrator was unknown. However, beginning in the last quarter of 2013, the Wingspan AVP began categorizing instances of violence differently than it had in past years, regardless of whether the perpetrator was known or unknown. For instance, in 2012 and most of 2013, stalking and sexual assault was almost always categorized as Intimate Partner Violence because the perpetrator was almost always at least an acquaintance. In addition, in past reports, discrimination was not categorized as a form of violence and thus did not usually reach the NCAVP as an incident of Hate Violence. Furthermore, Police Violence was almost never reported on and when these incidents were reported on, it was regularly considered a part of another perpetration rather than as a form of Hate Violence. These were all categorized differently in the 2014 report. Stalking, sexual assault, discrimination and Police Violence are categorized as either Intimate Partner Violence or Hate Violence depending on the relationship of the perpetrator to the survivor and the circumstances of the incident. This change better represents the experiences of survivors who feel targeted based upon their sexual orientation, gender identity, race, class, work, housing status and HIV status.

HOMICIDE NARRATIVES

2014 Hate Violence Related Homicides

INTRODUCTION

NCAVP documented 20 homicides in 2014, and these homicides continue multi-year trends demonstrating the disproportionate impact of severe violence against transgender women, LGBTQ and HIV-affected communities of color, transgender communities, and transgender communities of color. These narratives bring 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 2014's homicide victims. The report highlights the narratives of 2015 known LGBTQ and HIV-affected hate motivated homicides in 2014, however, there are a few incidences of HOMICIDES that were reported to NCAVP members that are not published in the report. Specifically, the victims in these incidents were closeted LGBTQ individuals and NCAVP programs did not want to reveal their identities, so these homicides are not included in the overall homicide numbers for 2014. 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 motives. 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.

HOMICIDE NARRATIVES

In Chronological order

Zachary Dutro-Boggess, 4 ⁵⁰

Portland, OR – August 2012

Zachary Dutro-Boggess, a 4-year-old child, was brutally assaulted by his mother, Jessica Dutro, and her boyfriend, Brian Canady, on August 14, 2012 in Portland, Oregon. According to Zachary's 7-year-old sister, "Jessica and Brian, they kept hitting him and punching him. He didn't listen to them so they kicked him and punched him and stuff and they kept doing it and doing it." Dutro and Canady did nothing while his health continued to decline and finally called for help when it was too late to save Zachary. Paramedics took Zachary to the hospital and he was taken off life support two days later. During the trial, a pattern of abuse against Zachary was revealed. Dutro believed Zachary was gay, and this is what motivated her to assault her son. Jessica Dutro was convicted of murder and second-degree assault in April 2014, and Canady was convicted of first-degree assault and second-degree manslaughter in March 2014. Dutro will serve 25 years in prison before she gets a chance at being paroled.

Britney Cosby, 24, Black lesbian cisgender woman

Crystal Jackson, 24, Black lesbian cisgender woman

Galveston County, TX – March 7

Crystal Jackson, 24, and Britney Cosby, 24, were found near a convenience store trash dumpster in Galveston County, Texas on March 7, 2014. Jackson died from a fatal gunshot, and Cosby died from severe head trauma. Britney Cosby's father, James Larry Cosby, was arrested for tampering with evidence in this case. Britney's mother, Loranda McDonald, said he had a problem with his daughter being gay. Police Captain Barry Cook said investigators weren't ruling out a hate crime as being a possible motive, but they weren't ruling other possible motives either. No one has been charged with the murders. Jackson and Cosby had been together for two years.

Dino Dizdarevic, 25, gay cisgender man

Chester, PA – May 1

On May 1, 2014, Dino Dizdarevic, a 25-year-old gay man, was found in Chester, Pennsylvania after being strangled and sustaining trauma to his face. On April 30, he told his boyfriend, Nick McBee, he was going to meet a man he had met on the social media/dating application Grindr. When McBee heard nothing from Dizdarevic later that night, McBee said he knew something was wrong. After McBee filed a missing person's report the next morning, he was taken to identify a body that matched Dizdarevic's description. The body was Dizdarevic. The District Attorney said, "We heard through the grapevine he may have been part of the gay

⁵⁰ Zachary Dutro-Boggess' homicide occurred in 2012, however the motive behind the homicide was revealed in 2014. NCAVP released a media alert about this incident in 2014. While the narrative of this homicide is included in this report, this homicide is not included in the total number of homicides for 2014.

community. We don't know if he was targeted because of that, but we're looking at any avenue necessary." Dizdarevic was a chemical engineer at the Stepan Community.

Ahmed Said, 27, Middle Eastern gay cisgender man

Dwone Anderson-Young, 23, Black/Somali gay cisgender man

Seattle, WA – June 1

One June 1, 2014, Ahmed Said, a 27-year-old gay man, and Dwone Anderson-Young, a 23-year-old gay man, were coming home from a club when they were fatally shot near Anderson-Young's home in Seattle, Washington. Ali Muhammad Brown was charged with two counts of aggravated first-degree murder. Police said Brown, Said, and Anderson-Young drove back to Anderson-Young's house after visiting the club. Brown, while in the backseat, pulled out a gun and shot Said and Anderson-Young multiple times in their heads and backs. Then he drove off in Said's car.; the car was later found abandoned. Anderson-Young was the great-grandson of jazz singer Ernestine Anderson. He had recently graduated from the University of Washington and was about to being a new job at Microsoft the next week. A friend of Said's said he was "just a good guy" who "always put a smile on my face." Said was the oldest son in a Somali family and worked two jobs.

Kandy Hall, 40, Black transgender woman

Baltimore, MD – June 3

On June 3, 2014, a body was found in an empty field nearby a post office and a school in Baltimore, Maryland. The body had sustained a massive trauma. Police initially reported that a man had been found, and the victim was Ricky Carlos Hall. They later changed their report and identified the victim as a transgender woman known as Kandy Hall, a 40-year-old African American transgender woman. Aaron Merkl, a co-chair of the Free State Legal Project said it was "very inappropriate" for the Police Department to refer to Hall as a man initially. Hall was a hairdresser from Annapolis, Maryland. Derrick Smith, Hall's friend, said, "she was a very fun-loving caring person. She just enjoyed life."

Zoraida Reyes, 28, Latin@ transgender woman

Anaheim, CA – June 12

On June 12, 2014, Zoraida Reyes's, a 28-year-old transgender woman, body was found outside a Dairy Queen in Anaheim, California. Police arrested Randy Lee Parkerson, 38, on suspicion of murder in October 2014. Reyes's friends and family believe she was targeted because of her transgender identity. Reyes was born in Michoacan, Mexico and immigrated to the United States. She graduated from Century High School in Santa Ana and received an associate degree from Santa Ana College. She was a member of Familia: Trans Queer Liberation Movement, the Orange County Dream Team, and DeColores Queer Orange County. Bamby Salcedo, Reyes's friend and president of the Trans Latin@ Coalition said, "Many of us aren't visible. Zoraida was one of those transgender individuals who are part of the movement and worked hard to bring our struggles to the forefront." Jorge Gutierrez, another friend, said, "She taught me how to be proud and how to be fearless when I was being myself."

Yaz'min Shancez, 31, Latin@ transgender woman

Fort Myers, FL – June 19

On June 19, 2014, Yaz'min Shancez, a 31-year-old transgender woman, was found dead behind a Budget store in Fort Myers, Florida; the employee had been taking his trash to a garbage bin and discovered Shancez. Shancez had been shot in the chest and parts of her body had been burned. Police arrested Terry Lynn Brady, 45, after a month long investigation. Police believed Brady shot Shancez, then set her on fire, and left her to die behind the Budget store. Police believe Brady may have been upset that Shancez outed him to the community. Brady was charged with second-degree murder. A vigil took place on June 22, and approximately 200 people attended to honor Shancez's memory.

Tiffany Edwards, 28, Black transgender woman

Cincinnati, OH – June 25 or June 26

Tiffany Edwards, a 28-year-old transgender woman, told her aunt on June 25 that she was going out with her friends. She was found shot to death the next day by a sanitation driver in Cincinnati, Ohio. Quamar Edwards, a man wanted in connection with Edwards's death, turned himself in to the police. Police said Quamar had solicited Edwards for sex and shot her after they argued. Quamar was indicted for aggravated robbery, aggravated murder, felonious assault, having weapons under disability, murder, and tampering with evidence. Officials associated with the Buckeye Region Anti-Violence Organization spoke out about Edwards's murder and said they believed it was motivated by hate, and she had been targeted based on her gender expression and gender identity.

Juan Ceballos, 20, Latin@ bisexual cisgender man

Mecca, CA – July 13

Juan Ceballos, a 20-year-old bisexual man, worked at a gas station and at Pizza Hut to help support his family and to pay his tuition at a local community college. On July 13, 2014, Juan returned home from work with a pizza and texted his younger brother, Sergio, to meet him outside the family residence in Mecca, California. Sergio heard two gunshots and ran outside, but Juan was already dead by the time Sergio reached him. Miguel Ramirez, Juan's coworker at the Pizza Hut, pled not guilty to charges of a hate crime, murder, and a special circumstance allegation of lying in wait. Police said the homicide had been motivated by Ceballos's sexual orientation. Maria Teresa Mendez, Juan's mother, said Juan "was a happy person and tried to guide his siblings to do good in life."

Mia Henderson, 26, Black transgender woman

Baltimore, MD – July 16

Mia Henderson, a 26-year-old African American transgender woman, was found on July 16, 2014 in a Baltimore alley; she had died from severe trauma. A neighbor told The Baltimore Sun she believed she saw Henderson and her killer enter the alley together. She said the man offered Henderson \$10 for a "date," but Henderson told the man, "No." Henderson was known as Kevin Long to family and friends. Henderson's brother was Reggie Bullock of the NBA's LA Clippers. Bullock said, "Kevin was the one to show me to live your own life. He was the most comfortable person in his own skin. He loved his brothers and sisters and his whole family."

Unnamed, age unknown, transgender woman

Detroit, MI - August 15

According to local NCAVP member organization Equality Michigan, on August 15th, 2014 an unidentified transgender woman was shot to death in Palmer Park, Michigan. According to local NCAVP member organization Equality Michigan, Detroit Police arrested Eduardo Moss in connection to the homicide. Local authorities also believe this homicide is connected to two other attacks against transgender women in Michigan in 2014.

Manuel Hakimian, 36, bisexual cisgender man

Norristown, PA – September 21

On September 21, 2014 Manuel Hakimian, a 36-year-old man, was found in his apartment in Norristown, Pennsylvania. He was discovered when he did not go to a family event, and family members went to his apartment. Several of Hakimian's belongings were missing, including his car, computer, and wallet. Police tracked down the purchases made with Hakimian's credit cards and used surveillance video showing a man withdrawing money. Police also saw Hakimian's stolen car, pursued it, but lost the driver when he abandoned it and ran away. Chad Marshall Wilcox, 29, was eventually arrested after failing to show up at a trial for another crime. Wilcox said when he was supposed to be at that trial, he posted a listing on Craigslist looking for sex with men, with the true intent of wanting to rob them of their money. Wilcox said Hakimian picked him up and drove him to Hakimian's home, Wilcox tied Hakimian's wrists and ankles to the bed, and three other men killed Hakimian. Authorities had no evidence to show that other men were involved. In January 2015, Wilcox pled not guilty to first, second, and third degree murder.

Aniya Parker, 47, Black transgender woman

East Hollywood, CA – October 2

On October 2, 2014, Aniya Parker was shot in the head in East Hollywood, California. Several security cameras recorded the attack. In one video, Parker was walking down the street while three men followed her. One man tried to take her purse from her, while the others attacked Parker. She tried to run away, but she was shot at close range. The Los Angeles Police Department believed the attack and homicide was a robbery that went wrong, but local community members connected to Parker believed it was also a hate crime. In December 2014, a 17-year-old was arrested in connection with the homicide.

Tajshon Ashley Sherman, 25, Black transgender woman

Indianapolis, IN – October 26

On October 26, 2014, the body of 25-year-old Tajshon Ashley Sherman, a transgender woman, was found under a light pole outside Tudor Park Condominiums in Indianapolis, Indiana. She had been fatally shot in the head. Police did not know whether she was killed where her body was found or whether her body had been left there.

Dionte Greene, 22, Black gay cisgender man

Kansas City, MO – October 31

On October 31, 2014, Dionte Greene, a 22-year-old African American gay man, was found in his still-running car in Kansas City, Missouri. He had been shot in the face. His friends and family believe he was killed after agreeing to meet a man for sex. His mother, Coshelle Greene, said, "Being that he wasn't a street person, and didn't have enemies, I lean towards it having to be someone who was on the down-low or someone against gay

people that they would do this.” Bridget Patton, an FBI officer, said this homicide was being identified under a federal civil rights statute, which includes bias-motivated hate crimes.

Gizzy Fowler, 24, Black transgender woman

Nashville, TN – November 1

On November 12, 2014, Gizzy Fowler, a 24-year-old transgender woman, was found fatally shot in the front yard of a Nashville residence. Neighbors heard a gunshot and saw an unfamiliar car sitting in the driveway of the residence. They saw lights on inside the unoccupied residence and called the police to report a possible burglary. When the police arrived, they found Fowler near the car’s passenger door. Fowler had traveled to meet Mallory Porter. Porter, an 18-year-old man, surrendered to police in March 2015. He was charged with criminal homicide and was jailed on \$150,000 bond. Porter denied any involvement in Fowler’s homicide.

Stephen Patrick White, 46, White gay cisgender man

Greensboro, NC – November 15

On November 15, 2014, Stephen Patrick White, a 46-year-old gay veteran, died from burns over 52% of his body in Greensboro, North Carolina. White was found naked, robbed, beaten, and set on fire, at the Battleground Inn after meeting someone at a local gay bar. An employee at the Inn called for help after hearing White screaming when the fire alarm sounded. As a result of the attack, White had part of his arm and a hand amputated. Garry Joseph Gupton, 26, was charged with felony first-degree murder and first-degree arson, and had beaten White with several pieces of furniture located in the hotel room.

Deshawnda “Tata” Sanchez, 21, Black transgender woman

Los Angeles, CA – December 3

On December 3, 2014, Deshawnda “Tata” Sanchez, a 21-year-old transgender woman, was shot to death in South Los Angeles, California. Sanchez had called the police saying she had been assaulted and robbed. During that phone call, Sanchez said the suspect had come back, and then shots were heard on the call. Sanchez ran up to someone’s house and pounded on the front door for help. The occupant of the house opened the door and went outside after hearing gunshots, but Sanchez was already dead. Police believed that Sanchez was trying to run away from the robber when she was fatally shot, but they are not eliminating other possible scenarios. Sanchez’s twin sister believed the true motive of the crime was related to Sanchez’s gender identity. Police arrested James Spells, 30, in February 2015.

Keymori Shatoya Johnson, 24, Black transgender woman

Albany, GA - December 6

On December 6, 2014, Keymori Shatoya Johnson, a Black transgender woman, was fatally shot in her home in Albany, Georgia. Police arrested Kuyaunnis James that day and charged him with possession of a firearm during a crime, soliciting prostitution, voluntary manslaughter, and involuntary manslaughter. The manslaughter charges and firearm charge were later dropped, and he was released on \$1,000 bond. Johnson’s advocates are concerned with how the District Attorney’s office has handled her gender and are worried that a grand jury may be biased by how the District Attorney refers to Johnson by the male name given to her at birth and male pronouns. The District Attorney said he would inform the jury of Johnson’s “birth name” and “everyday name.

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



NCAVP MEMBER AND AFFILIATE LIST

The following NCAVP member and affiliate list is current as of February, 2014. The member organizations and affiliates are listed alphabetically by state or province for ease of reference. 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 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

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.lalgbtcenter.org**Los Angeles****LAGLC Domestic Violence Legal Advocacy Project**

IPV, SV

Office: (323) 993-7649

Toll-free: (888) 928-7233

Web: www.lalgbtcenter.org**Los Angeles****LAGLC STOP Domestic Violence Program**

IPV, SV

Office: (323) 860-5806

Web: www.lalgbtcenter.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) 764-5150 x.111

Miami**The Lodge/Victim Response, Inc.**

IPV, SV

Crisis Line: (305) 693-0232

Web: www.thelodgemiami.org**Tallahassee****Inclusive LGBTQA Task Force**

HV, IPV

E-mail: yfairell@hotmail.com**Wilton Manors****Sunserve Sunshine Social Services**

IPV

Office: (954) 764-5150

Web: www.sunserve.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**East Point****Racial Justice Action Center**

HV, PM

Office: (404) 458-6904

Web: www.rjactioncenter.org

ILLINOIS**Chicago****Center on Halsted Anti-Violence Project**

HV, IPV, PM, SV

Office: (773) 871-2273

Web: www.centeronhalsted.org**Chicago****Illinois Accountability Initiative**

HV, IPV, PM, SV

Office: (630) 661-4442

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 (NCAVP Affiliate)**

HV, IPV, SV

Office: (504) 568-7474

New Orleans**LGBT Community Center of New Orleans**

HV, IPV, PM, SV

Office: (504) 945-1103

MASSACHUSETTS**Boston****Fenway 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) 742-4911

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**St. Louis****St. Louis Violence Response Initiative**

HV, IPV, SV, PM

Office: (314) 329-7660

Hotline: (314) 329-7668

Web: www.ejustmo.org**NEVADA****Las Vegas****Gender Justice Nevada**

HV, IPV, SV

Hotline: (702) 425-7288

NEW MEXICO**New Mexico GLGBTQ Centers**

Office: (575) 635-4902

Web: www.newmexicoglbtcqcenters.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.liglbtcntr.org**Buffalo****New York****Western New York Anti-Violence Project**

HV, IPV, SV, PM

Office: (716) 948-5744

New York**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****Raleigh****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

Web: www.bravo-ohio.org**ONTARIO****Toronto****The 519 Anti-Violence Programme**

HV, IPV, PM, SV

Client: (416) 392-6877

Web: www.the519.org**OREGON****Eugene****Oregon Anti-Violence Project, The Gender Center, Inc.**

HV, IPV, PM, SV

Office: (541) 870-5202

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**TENNESSEE****Memphis****Tabernacle of Love Ministries – Memphis**

HV, IPV, PM, SV

Office: (901) 730-6082

Web: www.tabernacleofloveministries.org**TEXAS**

Dallas**Resource Center Dallas**

IPV

Office: (214) 540-4455

Web: www.rcdallas.org**Dallas****Trans Pride Initiative**

HV, PM, IPV, SV

Office: (214) 449-1439

Web: www.tpride.org**Houston****Montrose Counseling Center**

HV, IPV, SV

Office: (713) 529-0037

Web: www.montrosecounselingcenter.org**VERMONT****Winooski****SafeSpace at the Pride Center of Vermont**

HV, IPV, PM, SV

Client: (866) 869-7341

Web: www.pridecentervt.org**VIRGINIA****Richmond****Virginia Anti-Violence Project**

HV, IPV, PM, SV

Office: (804) 925-8287

Web: www.virginiaavp.org**QUEBEC****Montreal****Centre de Solidarité Lesbienne**

IPV, SV

Client: (514) 526-2452

Web: www.soldaritelesbienne.qc.ca**WASHINGTON, D.C.****Casa Ruby**

HV, IPV, PM, SV

Office: (202) 355-5155

Web: casaruby.org**DC Trans Coalition**

HV, IPV, PM, SV

Office: (202) 681-DCTC

Web: www.dctranscoalition.org**GLOV (Gays and Lesbians Opposing Violence)**

HV, PM

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 (NCAVP Affiliate)**

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 Location of Intake		

CALLER INFORMATION	Intake Type: Hotline/Phone Email Mail Ofc/Walk-in Media Website	Entered Into Database ____/____/____ Call Back Needed Yes No Primary Language _____
	Case Number: _____	

Case Type(s) <i>(select all that apply):</i>	B: Hate Violence I: Intimate Partner Violence H: HIV-related NA: Hotline
	P: Police Violence S: Sexual Violence Z: Pick-up violence

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 _____ Non-LGBTQ org Phone Book Police Other (specify): _____

SURVIVOR/VICTIM #1	SURVIVOR/VICTIM INFORMATION
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Number of Survivors/Victims: _____ <i>(Attach 'Additional Survivor/Victims Form' to document other survivor/victims)</i> Survivor/Victim is: Person Organization Name: _____ Address: _____ _____ Phone: _____ Email: _____ Prefers contact via: Phone Email OK to say 'AVP?' Yes No Unk. OK to leave message? Yes No Unk. OK to email 'AVP?' Yes No Unk. OK to receive mail?' Yes No Unk.	AGE:	< 14 40-49 15-18 50-59 19-24 60-69 25-29 70-79 30-39 > 80 Not disclosed Age (if known): _____ D.O.B: ____/____/____	GENDER ID (check all that apply):
			Man Woman Non-Transgender Transgender Self-Identified/Other (specify): _____ Not disclosed
			INTERSEX:
			Yes No Not disclosed

RACE/ETHNICITY (check all that apply):	SEXUAL ORIENTATION:	IMMIGRATION STATUS:	HIV STATUS:
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): _____ _____ South Asian Not disclosed	Bisexual Gay Heterosexual Lesbian Queer Questioning/ Unsure Self-Identified/ Other (specify): _____ _____ Not disclosed	U.S. citizen Permanent resident Undocumented Other Not disclosed	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**

Date of Incident: __/__/__ Time of Incident: __: __ am/pm Precinct where incident occurred: _____	Location/ Address of Incident: _____ _____ ZIP _____
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Is this a Serial Incident? Yes No Unk. Previous police report filed? Yes No Unk.
 If Yes: Number of Previous Incidents 1 2-5 6-10 11+ Unk. Ongoing since: __/__/__

TYPE(S) OF VIOLENCE <i>(check all that apply):</i>	SITE TYPE <i>(check one):</i>
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<p style="text-align: center;">VIOLENCE AGAINST PERSON <i>(check all that apply):</i></p> <p>Physical violence against person <i>(check all that apply):</i> Forced use of alcohol/drugs Murder Attempted murder Physical violence Attempted physical violence Robbery Attempted robbery Sexual violence Attempted sexual violence Self-injury Suicide Attempted suicide Other self-harming behavior <i>(cutting, etc.)</i></p> <p>Was a weapon involved? Yes No Unknown List weapon: _____</p> <p>Did the person die? Yes No Unknown</p> <p>Was the person injured? Yes No Unknown</p> <p>If yes, severity of injury: No injuries requiring medical attention Injuries requiring medical attention (specify): Needed but not received Outpatient (Clinic/MD/ER) Hospitalization/Inpatient Not disclosed</p> <p>Type of injury (specify): _____ _____</p>	<p>Other violence against person <i>(check all that apply):</i> Blackmail Bullying Discrimination Eviction False police reporting Financial Harassment (NOT in person: mail, email, tel. etc) Isolation Limiting/restricting bathroom access Medical Psychological/Emotional abuse Sexual harassment Stalking Threats/Intimidation Use of children (threats, outing, etc.) Use of immigration status Verbal harassment in person Violence against pet Pet injured Pet killed Other (specify): _____</p> <hr/> <p>Police violence/misconduct <i>(check all that apply):</i> Excessive force Police entrapment Police harassment Police raid Unjustified arrest Use of condoms as evidence</p> <p><i>Reported to internal/external police monitor?</i> Yes No Will Report Attempted, complaint not taken Not available Unknown</p> <p>Other (specify): _____</p>	<p>Cruising area In or near LGBTQ-identified venue Media Non-LGBTQ-identified venue (bar, restaurant, etc.) Online/Internet Police precinct/ jail/ vehicle Public Transportation Private residence School/college/university Shelter DV/IPV Non-DV/IPV Street/public area Other (specify): _____ Workplace (place where survivor or abusive partner is employed) Not disclosed</p> <p>Was this incident related to pick-up violence? 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 Other website/app (specify): _____</p> <hr/> <p>MOTIVE <i>(check all that apply):</i> Intimate partner violence Economic Pick-up violence Police violence Sexual violence Bias violence Anti-Homelessness/Classism 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>
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<p style="text-align: center;">VIOLENCE AGAINST PROPERTY <i>(check all that apply):</i></p> <p>Arson Theft Vandalism Other (specify): _____</p> <p>*Est. stolen/damaged property value: \$ _____</p>	<p>Unknown</p>
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OFFENDER INFORMATION **3**

Total Number of Offenders:	Is offender a member of identifiable hate group? Yes No Unk.	Hate group's name(s): _____
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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 (Live-in Non Live-In) Landlord
 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
 Tenant/Neighbor 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 ____	Non-Transgender ____	Asian/Pacific Islander ____	Queer ____ Questioning/Unsure ____
25-29 ____	Transgender ____	Black/African American/ African Descent ____	Self-Identified/Other ____
30-39 ____	Self-Identified /Other ____	Indigenous/First People/ Native American/ American Indian ____	(specify): _____
40-49 ____	Not Disclosed ____	Latina/o ____	Not disclosed ____ Unknown ____
50-59 ____	Unknown ____	White ____	
60-69 ____		Self-Identified /Other ____	OFFENDER USE OF ALCOHOL/DRUGS
70-79 ____		(specify): _____	Alcohol involved?
80 or over ____		South Asian	Yes No Not disclosed Unk.
Not disclosed ____	INTERSEX:	Not disclosed ____	Drugs involved?
Age (if known) ____	Yes No	Unknown ____	Yes No Not disclosed Unk.
D.O.B: ____/____/____	Not disclosed Unknown		If yes, describe: _____

POLICE/COURT RESPONSE

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

<p>POLICE RESPONSE</p> <p>What was police attitude toward survivor/victim? Courteous Indifferent Hostile Unk.</p> <p>Did police do any of following to survivor/victim? (check all that apply): Arrest survivor/victim _____ Verbal abuse/bias language _____ Physical violence _____ Police refused to take complaint _____ Sexual violence _____ Other negative behaviors (specify): _____</p> <p>_____ If police violence/misconduct, reported to internal/external police monitor? Yes No Will Report Attempted, complaint not taken Not available Unknown</p>	<p>POLICE REPORTING</p> <p>Did survivor/victim report incident to police? Yes No Unknown Will report</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/Mun. County State Federal (specify): _____ Other (please specify): _____ Police Badge # _____</p> <p>PROTECTIVE ORDERS</p> <p>Was a protective order sought by survivor/victim? Yes No Unknown</p> <p>Was the protective order granted? 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>
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POLICE/COURT RESPONSE <i>(continued)</i>		4
<p>DOMESTIC VIOLENCE CLASSIFICATION N/A</p> <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>BIAS INCIDENT CLASSIFICATION N/A</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>	

SERVICES PROVIDED

GENERAL SERVICES	ADVOCACY <i>(check all types that apply):</i>	REFERRALS <i>(check all that apply):</i>	FOLLOW-UP NEEDED?
Counseling Safety planning	Housing Legal Medical Mental health Police Public benefits Disability/SSD Medicaid/Medicare Public Assistance/Food Stamps Shelter/Housing Unemployment Other <i>(specify):</i> _____	Housing Legal Shelter DV Homeless Medical Police Other <i>(specify):</i> _____	Agency follow-up Caller follow-up

CASE STATUS & MANAGEMENT (Staff Only)	
Case Opened Assigned to: _____	Case Closed
Case Reassignment Re--assigned to: _____	Case Data Update
Re-Opened Closed Case Assigned to: _____	Quality Status Review
Case Conference Presentation	

NARRATIVE

In your description of the case/incident, please make sure that you give the scenario of the violence, including the use of weapons, the specific anti-LGBTQ words used (if any), and extent of injuries.
