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LGBTQ INTIMATE PARTNER VIOLENCE AND COVID-19

INTRODUCTION

Every day, LGBTQ (Lesbian, Gay, Bisexual, Transgender, and Queer) people face increased risk of violence, including by an intimate partner. Intimate partner violence describes physical violence, sexual violence, stalking, or psychological harm by a current or former partner or spouse. This type of violence can occur among LGBTQ and non-LGBTQ partners and does not require sexual intimacy. A 2013 study released by the Centers for Disease Control (CDC) revealed high rates of intimate partner violence among the LGBTQ community. Bisexual women in particular reported experiencing sexual violence at rates twice that of their heterosexual counterparts. Lesbians and gay men also reported starkly higher incidents of violence than straight people. Fear of discrimination and threats of “outing” to friends, family, and employers also prevent many LGBTQ survivors of intimate partner violence from reporting abuse to authorities or seeking help from social services or programs. Too often, the impact of this violence is compounded by lax gun regulations that allow criminals, predators, and abusers to easily access dangerous weapons.

As the inevitable economic and health consequences of COVID-19¹ continue to unfold across the globe, the national media and leading professional organizations like the American Psychological Association have responded to the devastating increased risk of intimate partner violence.² The providers that work every day on the frontlines with survivors of violence know that even in the best of climates, the rates of intimate partner violence are staggering. More than 80 million people across the nation have experienced intimate partner violence in their lifetimes.³ It is expected that rates of intimate partner violence will increase as a result of stay-at-home orders, yet reporting may significantly decline as victims remain in living situations in which they can't safely get help.⁴ In assessing three cities to determine the effect of COVID on reports of intimate partner violence, the Marshall Project found that reports to law enforcement of

1 Human Rights Campaign Found, *The Lives and Livelihoods of Many in the LGBTQ Community are at Risk Amidst COVID-19 Crisis* (2020), <https://www.hrc.org/resources/the-lives-and-livelihoods-of-many-in-the-lgbtq-community-are-at-risk-amidst>.

2 See Ashley Abramson, *How COVID-19 may increase domestic violence and child abuse*, *AM. Psychological Ass'n* (Apr. 8, 2020), <https://www.apa.org/topics/covid-19/domestic-violence-child-abuse>.

3 See Ctr. Disease Control & Prevention, *Preventing Intimate Partner Violence* (last updated Feb. 26, 2019), <https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html>.

4 See Substance Abuse & Mental Health Serv. Admin., *Intimate Partner Violence And Child Abuse Considerations During COVID-19* (2020), <https://www.samhsa.gov/sites/default/files/social-distancing-domestic-violence.pdf>.



intimate partner violence did indeed decline but not as significantly as the overall crime rate (23% compared to 43%).⁵ Additionally, the reports of intimate partner violence were often more violent during this period.

LGBTQ PEOPLE AND INTIMATE PARTNER VIOLENCE

Within the LGBTQ community, transgender people and bisexual women face the most alarming rates of sexual violence. Among both of these populations, sexual violence begins early, often during childhood. According to the CDC's National Intimate Partner and Sexual Violence Survey (NISVS), 44% of lesbians and 61% of bisexual women experience rape, physical violence, or stalking by an intimate partner, compared to 35% of straight women.⁶ Disability has also been shown to correlate with more and greater poor mental health outcomes due to abuse such as intimate partner violence.⁷ Research that analyzed data from the NISVS found that bisexual women reported having a disability prior to abuse more frequently than heterosexual women, and thus exacerbated poor health outcomes after they experienced abuse.⁸ This may explain why bisexual women report some of the highest rates of experiencing intimate partner violence. Bisexual men also experienced rates of rape, physical violence, or stalking

PERCENTAGE OF WOMEN EXPERIENCING RAPE, PHYSICAL VIOLENCE OR STALKING BY AN INTIMATE PARTNER



CDC's National Intimate Partner and Sexual Violence Survey

by an intimate partner at higher rates than their straight counterparts. The 2015 U.S. Transgender Survey found that more than half (54%) of transgender and non-binary respondents experienced intimate partner violence in their lifetimes.⁹

5 Wehwa Li & Beth Schwartzapfel, *Is Domestic Violence Rising During the Coronavirus Shutdown? Here's What the Data Shows.*, Marshall Project (Apr. 22, 2020), <https://www.themarshallproject.org/2020/04/22/is-domestic-violence-rising-during-the-coronavirus-shutdown-here-s-what-the-data-shows>.

6 Ctr. Disease Control & Prevention, NISVS: An Overview Of 2010 Findings On Victimization By Sexual Orientation (Jan. 2013), https://www.cdc.gov/violenceprevention/pdf/cdc_nisvs_victimization_final-a.pdf.

7 See Bethany M. Coston, *Disability, sexual orientation, and the mental health outcomes of intimate partner violence: A comparative study of women in the U.S.*, 12 *Disability & Health J.* 164 (Apr. 2019), <https://www.sciencedirect.com/science/article/abs/pii/S1936657418302061>.

8 Id.

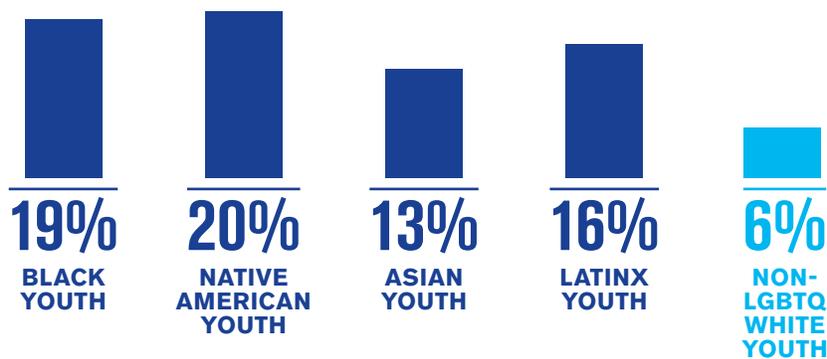
9 Sandy E. James Et Al., Nat'l Ctr. Transgender Equal., *The Report Of The 2015 U.S. Transgender Survey* 15 (Dec. 2016), <https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf>.



LGBTQ youth also routinely report higher rates of dating and intimate partner violence than their straight peers. Based on the CDC's Youth Risk Behavior System (YRBS) data, 8% of youth in the United States have experienced physical dating violence and 7% have experienced sexual dating violence.¹⁰ An analysis of YRBS microdata also captures evidence of disparities in sexual and physical dating violence between LGBTQ and non-LGBTQ youth in 2017. Among non-LGBTQ respondents, 7% reported experiencing physical dating violence and 8% reported they experienced sexual dating violence. However, 18% of LGBTQ respondents reported experiencing physical dating violence and 16% reported experiencing sexual dating violence.

This research also reveals that 18% of bisexual youth have experienced physical dating violence and 17% have experienced sexual dating violence. In addition, trans youth experience high levels of violence. Among trans respondents, 20% have experienced physical dating violence and 12% have experienced sexual dating violence. Trans youth experienced the highest levels of physical dating violence.

PERCENTAGE OF YOUTH EXPERIENCING SEXUAL DATING VIOLENCE



LGBTQ youth of color are also at greater risk of physical and sexual dating violence when compared to non-LGBTQ white youth. One in 10 Black youth and 8% of Latinx youth report experiencing physical dating violence compared to 7% of white youth. These young people also report higher rates of sexual dating violence. YRBS data shows that 19% of Black respondents, 20% of Native American respondents, 13% of Asian respondents, and 16% of Latinx respondents have experienced physical dating violence compared to 6% of non-LGBTQ white youth. This survey also found that 14% of Black respondents, 10% of Native American respondents, 21% of Asian respondents, and 17% of Latinx respondents have experienced sexual dating violence, compared to 8% of non-LGBTQ white youth.

10 Ctr. Disease Control & Prevention, Youth Risk Behavior Survey: Data Summary & Trends Report 2007–2017 31 (2018), <https://www.cdc.gov/healthyyouth/data/yrbs/pdf/trendsreport.pdf>.



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DISCRIMINATION, STIGMA, AND VIOLENCE FACED BY THE LGBTQ COMMUNITY

LGBTQ survivors of intimate partner violence are often denied access to domestic violence services, turned away from shelters, improperly arrested as the primary aggressor, and denied orders of protection because of their sexual orientation or gender identity. In fact, 85% of service providers working with LGBTQ victims report that the victim had been previously denied services because of their sexual orientation or gender identity.[1] However, since passage of the 2013 reauthorization of the Violence Against Women Act (VAWA), the LGBTQ community has been recognized as an underserved population and is entitled to be protected from discrimination by service providers.

Victims of intimate partner violence who are living with an abuser are often forced to leave their home with little of their belongings. For many of these victims, this journey ends in homelessness. LGBTQ victims of intimate partner violence often face a similar challenge. Over half of LGBTQ survivors of intimate partner violence report experiencing homelessness as a result of the abuse.[1] Once they are without housing, LGBTQ people, especially transgender people, are at an increased risk for violence, criminalization, sexual exploitation, and trafficking. Protecting LGBTQ victims from discrimination when seeking housing is essential to providing victims with safety and stability for themselves and their families.

Nevertheless, LGBTQ people have endured decades of stigma and violence. As a community, LGBTQ people face higher rates of poverty, stigma, and marginalization, which puts them at greater risk for intimate partner violence. LGBTQ people — especially those who are transgender, bisexual, or in Black and Latinx communities — are more likely to live in poverty, lack health insurance, and be without access to paid leave benefits. Moreover, these inequities are often exacerbated by decades of discrimination experienced throughout a lifetime. LGBTQ people, especially transgender people, also face higher rates of hate-motivated violence, which can take the form of intimate partner violence. The ways in which society both hypersexualizes LGBTQ people and stigmatizes their relationships can lead to intimate partner violence that stems from internalized homophobia, transphobia, and shame. While there is some evidence that shows more individuals are becoming accepting of LGBTQ people, there still remains chasms in progress between members of the community.

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Historically, U.S. Supreme Court decisions that advance LGBTQ equality have prompted backlash from opponents of LGBTQ rights and in the short term impacted support among individuals whose views on LGBTQ rights are evolving. After the decision in *Lawrence v. Texas*, which decriminalized same-sex sex, support for decriminalization significantly



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declined by about 11%.¹¹ These attitudes are rooted in stigma about same-sex sex and such stigma has long had grave consequences for LGBTQ people.

For example, such stigma has largely contributed to the disproportionate impact of the HIV epidemic on members of the community. Those who are gay, bisexual, or men who have sex with men, have been significantly affected. Specifically, Black and Latinx men who have sex with men account for the largest communities that have been and are currently being affected by the HIV epidemic,¹² as well as Black and Latinx transgender women.¹³

Stigma generates more stigma and seeps into decision making on vital policies and programs. Only in light of COVID-19 has the federal government eased¹⁴ an anti-LGBTQ Food and Drug Administration (FDA) regulation that operates as a de facto exclusion of gay, bisexual, pansexual, and queer men blood donors.¹⁵ However, with the national legalization of same-sex marriage in the *Obergefell v. Hodges* decision, backlash may not be as prevalent as it has been in the past, showing signs of progress and resilience.¹⁶

Research has consistently found that there has been progress over the past few years to reduce stigma against LGBTQ people, much of this progress has benefitted gay and lesbian populations, while bisexual and transgender people are still stigmatized at higher rates.¹⁷

Across the United States, anti-transgender stigma and systemic discrimination heighten the vulnerability of transgender and gender non-conforming people from an early age. In fact, in the seven years that the HRC has tracked anti-transgender violence, an average of at least 22 transgender and gender non-conforming people have been victims of fatal violence per year. An overwhelming majority of these victims have been Black transgender women. Based on available demographic data and these reportings, HRC estimates that Black transgender women experience a violent killing rate roughly five times that of the general population, and these rates are a product of anti-trans stigma, as well as sexism and racism.

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- 11 Stephen M. Engel, *Frame Spillover: Media Framing and Public Opinion of a Multifaceted LGBT Rights Agenda*, 38 L. & Soc. Inquiry 403, 403 (2013).
- 12 Ctr. Disease Control & Prevention, *HIV in the United States and Dependent Areas* (last reviewed June 10, 2020), <https://www.cdc.gov/hiv/statistics/overview/ata glance.html>.
- 13 Ctr. Disease Control & Prevention, *HIV and Transgender People* (last reviewed Nov. 12, 2019), <https://www.cdc.gov/hiv/group/gender/transgender/index.html>.
- 14 Statement from Peter Marks, Director of Center for Biologics Evaluation and Research at Food & Drug Admin. (Apr. 2, 2020), <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-provides-updated-guidance-address-urgent-need-blood-during-pandemic>.
- 15 See U.S. Food & Drug Admin., Revised Recommendations For Reducing The Risk Of Human Immunodeficiency Virus Transmission By Blood And Blood Products: Guidance for Industry (Apr. 2020), <https://www.fda.gov/media/92490/download>.
- 16 See Emily Kazyak & Mathew Stange, Backlash or a Positive Response?: Public Opinion of LGB Issues After Obergefell v. Hodges, 65 J. Homosexuality 2028 (2018).
- 17 Philip Edward Jones et al., Explaining Public Opinion toward Transgender People, Rights, and Candidates, 82 Pub. Opinion Q. 252 (May 15, 2018), <https://academic.oup.com/poq/article/82/2/252/4996117>.



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Even in the face of physical danger, hatred, and discrimination — sometimes endorsed and enforced by those at the highest level of our government — transgender and gender non-conforming people live courageously and overcome unjust barriers in all corners of the country. Amid a global health pandemic, the Trump Administration continues to take steps to erase protections for LGBTQ people in health care, protections that would especially impact the ability of transgender people to receive medical treatment or care if they are rescinded.¹⁸

Until the barriers facing transgender and gender non-conforming people are dismantled, these populations will continue to face higher rates of discrimination, poverty, homelessness, and violence, including intimate partner violence.

[1] GLBT Domestic Violence Coalition & Jane Doe Inc., *Shelter/Housing Needs of Gay, Lesbian, Bisexual and Transgender Victims of Domestic Violence: Analysis of Public Hearing Testimony, Massachusetts State House* (October 27, 2005) at 6.

THE EFFECT OF COVID-19 ON RATES OF INTIMATE PARTNER VIOLENCE

The isolated environment, as well as financial strain and other forms of stress that COVID-19 has fostered, creates an environment where there is increased risk of intimate partner violence, and such risk is much higher for LGBTQ people.

COVID-19 has impacted financial stability and wellness of parents and families everywhere. According to HRC Foundation's research, LGBTQ adult workers are roughly twice as likely to work in industries among the most affected by the pandemic.¹⁹ That same research also shows that LGBTQ people experience greater health risks, as they are more likely than non-LGBTQ people to have compromised respiratory systems, either because they are more likely to smoke or have asthma.

HRC Foundation has more recently found that LGBTQ people dually express low rates of satisfaction with their financial situation. Based on HRC Foundation's latest analysis of General Social Survey (GSS) data, only 21% of LGBTQ adults are satisfied with their financial situation compared to 33% of non-LGBTQ adults. COVID-19 will only exacerbate this financial strain that disproportionately affects LGBTQ people.

In fact, new data released in partnership with PSB Research demonstrates a fuller scope of the economic impact of COVID-19

PERCENTAGE OF ADULTS SATISFIED WITH THEIR FINANCIAL SITUATION



LGBTQ ADULTS



NON-LGBTQ ADULTS

¹⁸ Viet Tran, *Trump-Pence Admin Moves To Undermine LGBTQ Non-Discrimination Protections in Health Care* (Apr. 24, 2020), <https://www.hrc.org/blog/trump-pence-admin-moves-to-undermine-lgbtq-protections-in-health-care>.

¹⁹ Human Rights Campaign Found., *supra* note 1, at 2.



on the LGBTQ community. LGBTQ people are more likely to have experienced a cut in work hours, are more likely to feel that their personal finances are in worse shape, and are more likely to be taking steps to actively prepare for the virus. First, 30% of LGBTQ respondents had their work hours reduced, compared to 22% of the general population. Second, 20% of LGBTQ respondents said their personal finances are much worse off than they were a year ago, compared to only 11% of the general population. Third, LGBTQ people are twice as likely as the general population to think their finances will be much worse off a year from now, 10% of LGBTQ respondents compared to 5% of the general population.

Considering the LGBTQ community's history with experiencing intimate partner violence, it is expected that the community will be particularly impacted amidst COVID-19. Based on data also collected by PSB Research and HRC, rates are increasing in frequency and magnitude during this pandemic, and LGBTQ people are being disproportionately impacted. According to the survey results, LGBTQ people have been twice as likely to have experienced an incident of intimate partner violence since the onset of COVID-19. While 68% of the general population sample who have experienced intimate partner violence since the onset of COVID-19 said the pandemic has increased the duration and frequency of such violence, this was greater (77%) among LGBTQ respondents.

THE VIOLENCE AGAINST WOMEN ACT

The Violence Against Women Act was passed by Congress and signed into law by President Clinton in 1994 and received reauthorization from strong bipartisan majorities in 2000, 2005, and 2013. The 2013 reauthorization provided explicit protections for LGBTQ people, Native women, and undocumented immigrants. In addition to federal protections included in VAWA, some state and local laws prohibit discrimination in housing and delivery services on the basis of sexual orientation and gender identity. Many federal grants and programs still also include some level of protections for LGBTQ people, despite the Trump administration's efforts to systematically dismantle these rights.

It is critical that Congress reauthorizes VAWA and maintains explicit federal protections for LGBTQ people. Organizations and providers — including law enforcement and healthcare workers — must develop core cultural competencies to best serve this community. The Department of Justice has previously identified that gender bias may result in law enforcement officers providing a form of less protection to certain victims on the basis of gender, failing to respond to crimes that disproportionately harm a particular gender, or offering less robust services due to a reliance on gender stereotypes. The Justice Department specifically provides that bias can result in misclassifying or underreporting cases of sexual assault and intimate partner violence cases. Bias and stereotypes can also lead to dismissal of sexual assault or violence complaints as “family matters” rather than as crimes.²⁰

20 Dep't Of Justice, Identifying And Preventing Gender Bias In Law Enforcement Response To Sexual Assault And Domestic Violence (Dec. 15, 2015), <https://www.justice.gov/opa/file/799366/download>.



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CONCLUSION

As this report outlines, the conditions wrought by the COVID-19 pandemic exacerbate both the incidence and the magnitude of intimate partner violence, especially in the LGBTQ community. This reality should give pause to service providers, law enforcement agencies, and policymakers alike; and underscores the need for culturally competent survivor supports that are inclusive of LGBTQ people, and sensitive to the realities faced by transgender people living at the intersection of multiple marginalized identities.

Despite some progress over recent years in reducing stigma against the LGBTQ community in America, LGBTQ people still face discrimination and violence simply for being who they are. This discrimination can sometimes find its way into taxpayer-funded programs intended to support victims of intimate partner violence and can discourage vulnerable people from seeking help when they're victimized. Congress should reauthorize the Violence Against Women Act—as amended to include protections for LGBTQ people and other underserved groups—to protect victims of violence from discrimination in taxpayer funded programs, and reduce the underreporting of intimate partner violence. Finally, Congress should pass the Equality Act, not just to prevent discrimination in federal programs, but to prevent discrimination LGBTQ people face in other key areas of life.

RESOURCES

If you or someone you know is the victim of intimate partner violence, here are some resources that serve LGBTQ survivors:

- + **Love is Respect Hotline**
1-866-331-99474 (24/7) or Text “loveis” 22522
- + **The Anti-Violence Project** – serves people who are LGBTQ
Hotline 212-714-1124 Bilingual 24/7
- + **GLBT National Help Center**
Hotline 1800-246-PRIDE (1-800-246-7743) or
Online Chat at <http://www.volunteerlogin.org/chat/>
- + **National Sexual Assault Hotline** – supports LGBTQ people
1-800-656-HOPE (4673) 24/7 or
Online Counseling at <https://ohl.rainn.org/online/>
- + **Gay Men’s Domestic Violence Project Hotline**
1-800-832-1901

[1] National Task Force to End Sexual and Domestic Violence Against Women LGBTQ Provisions of S. 1925: Myths v. Facts, 2013. Available at: <http://4vawa.org/4vawa/lgbtq-provisions-of-s-1925-myths-v-facts>.



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METHODOLOGY

Data, Weighting, and Variance Calculations

In order to obtain estimates for LGBTQ youth experiences of physical and sexual dating violence, HRC utilized the public-use microdata available from the Centers for Disease Control's Youth Risk Behavior System. Because not every state asks sexual orientation and gender identity questions and not every state makes its data publically available on the CDC's data and documentation domain, this analysis is generally limited to a subset of states available on the CDC domain. Data are weighted according to the specifications set forth by the CDC. For variance estimation within strata that contain a single unit, the strata are centered at the population mean instead of the stratum mean.

The Life-Imperative Need for LGBTQ Data Collection

State and federal officials have failed the LGBTQ community when it comes to ensuring equal treatment in government data collection efforts. While some federal and state data collection efforts include metrics on gender identity, most state and federal data collection efforts fail to obtain this data. Measures are also omitted from the country's largest demographic data collection endeavors such as the decennial U.S. Census. Municipalities, states and the federal government can and should promulgate policies that require their respective data collection undertakings to be fully inclusive of the LGBTQ community.

Intimate Partner Violence Data (PSB-HRC Data)

PSB conducted a series of online nonprobability polls. Data are weighted to U.S. Census demographic targets and HRC-advised targets for SOGI statistics to be nationally representative.