



Intimate Partner Violence among Sexual Minority Populations

Hae Rim Jin, M.A.

Cortney A. Franklin, Ph.D

Over the past three decades, the literature on intimate partner violence (IPV) has seen advances by including the victimization of same-sex individuals. An understanding of interpersonal violence within gender and sexual minority populations has been largely overlooked in the criminal justice system and among victim advocacy organizations in the United States, despite the substantial harm produced by violence in relationships. A significant contribution to this disparity has been adherence to homophobia. Defined as experiencing fear directed toward individuals as a result of negative attitudes and prejudicial beliefs based on their sexuality and gender (Herek, 2004), homophobia has been central to understanding the bias and discrimination experienced by individuals in same-sex relationships by the criminal justice system. Discriminatory responses to gender and sexual minorities have included increased levels of victim blame and decreased social services for victims in same-sex relationships.

The Violence Against Women Act (VAWA, 1996) has been monumental in drawing attention to the experiences of female victims of violence, though it failed to include protections for same-sex couples until 2013. In addition, prior to the United States Supreme Court's decision to legalize same-sex unions in *Obergefell v. Hodges* (2015), many state domestic violence statutes excluded same-sex couples and, therefore, did not protect them from interpersonal violence (Barnes, 1998; Burke, Jordan, & Owen, 2002; Elliott, 1996). The Supreme Court's decision reiterated the lack of legal protection traditionally afforded heterosexual populations and the continuing need for scholars to be more inclusive in scientific studies of IPV.

Furthermore, while recent years have reshaped the heterosexual paradigm rooted in the 1960s domestic violence movement (Ristock, 2003), public policies have generally failed to identify the unique needs of same-sex IPV victims. Both federal and state funding have largely been awarded to programs that provide services to heterosexual IPV victims (Murray & Mobley, 2009). As a result, gender and sexual minorities have been reluctant to report IPV to police and have been less likely to seek and receive services than

their heterosexual counterparts, highlighting an important shortcoming of the resources available to victims that can aid recovery.

Within the criminal justice system, victims of IPV from the same-sex community face greater legal challenges than heterosexual victims when stereotypes regarding heterosexual relationships and IPV have been applied to cases of same-sex partner violence (Johnson, 2000; Wasarhaley, Lynch, Golding, & Renzetti, 2015). These stereotypes include the belief that women are inherently non-violent and that men are expected to be "masculine" and aggressive in interpersonal settings (Hassouneh & Glass, 2008; Kay & Jeffries, 2010). Indeed, same-sex victims are more likely than heterosexual victims to be blamed and less likely to be viewed as credible by criminal justice decision makers and in court settings due to their failure to conform to traditional gender roles and the stereotypical profile of a "legitimate" or "true" victim (Abrams, Viki, Masser & Bohner, 2003; Little & Terrance, 2010). When victims of same-sex IPV are criminally charged for using physical force against abusers, their claims of self-defense and history of abuse are less likely to be believed by jurors due to widespread misconceptions about IPV in same-sex couples, homophobia, and the public stigma associated with homosexuality (Carvalho, Lewis, Derlega, Winstead, & Viggiano, 2011; Poorman & Seelau, 2001; Poorman, Seelau, & Seelau, 2003). To be sure, both victims and perpetrators of same-sex IPV have received more punitive responses when compared to their heterosexual counterparts, as they are perceived to violate these traditional gender norms (Carvalho et al., 2011; Poorman et al., 2003; Rohrbaugh, 2006). This report provides an overview of the literature on same-sex partner violence to encourage and facilitate appropriate, culturally-sensitive service provision and response among advocates, social service agencies, and criminal justice system personnel.

Sexual Minorities and IPV

A general understanding of IPV rooted in the second wave of the women's movement that took place in the 1960s and

1970s (Dicker, 2008; Freedman, 2002) called attention to IPV as a form of victimization that disproportionately affected women (Murray & Mobley, 2009). Historically, research on IPV focused on heterosexual relationships, with the assumption that IPV was characterized by male-perpetrated violence against female partners (Cannon & Buttell, 2015; Poorman et al., 2003). Specifically, the domestic violence movement argued that woman battering was the result of a patriarchal society (Martin, 1976; Johnson, Kuck, & Schander, 1997) that emphasized hypermasculinity, sexist attitudes toward women, control, and dominance as highly valued and normalized in relationships and among the broader cultural context (Messerschmidt, 2004; Murray & Mobley, 2009).

Events in previous decades propelled changes to the conceptualization of IPV and the need for a more inclusive paradigm that considered same-sex relationships. Scholarly interest in same-sex IPV is traced to Burke and Follingstad's (1999) seminal review of the literature, which documented same-sex IPV as an understudied phenomenon resulting from widespread cultural misperceptions of IPV, such as the infrequency of homosexual relationships and the belief that IPV is perpetrated by men toward women. Additionally, bias against the gender and sexual minority community and reluctance to acknowledge the existence of same-sex relationships played a notable role in the relative lack of empirical research on same-sex IPV. Limited scholarly interest was also influenced, in part, by perceptions of homosexuality as inherently associated with psychopathology (Bayer, 1987; Herek, 2004; Minton, 2002). Consequently, the study of victimization among gender and sexual minorities has been largely overlooked in criminal justice (Herek, 2004), and victims have been generally excluded from public health policies (Elliott, 1996).

The Supreme Court's decision in *Obergefell* (2015) universally acknowledged same-sex unions (Blosnich & Bossarte, 2009). The legalization of marriage, regardless of an individual's sexual orientation, has reiterated the continuing need for scholars to include individuals from the gender and sexual minority community in scholarship on IPV to better serve them in criminal justice and social service contexts. Indeed, perceptions of victim culpability in same-sex IPV is instructive to consider as victims have been blamed more frequently for their abuse and have not been taken seriously by criminal justice actors and victim service providers upon seeking help (Brown & Groscup, 2009; Cormier & Woodsworth, 2008; Harris & Cook, 1994). Finally, gender and sexual minorities have expressed fear of discrimination from service providers and consequently, have been less likely to seek and use resources. This has elevated the likelihood of developing psychological and physical symptoms post-victimization (Balsam & Szymanski, 2005; Messinger, 2011), such as post-traumatic stress disorder (PTSD), anxiety and depression, sleep disruptions, elevated startle responses, and a host of physical ailments which have limited prosocial integration and healthy functioning for same-sex IPV survivors.

Prevalence of IPV in Same-Sex Partnerships

Empirical studies have demonstrated prevalence rates of IPV that are generally higher for homosexual men and women when compared to heterosexuals (Carvalho et al., 2011; Edwards, Sylaska, & Neal, 2015; Messinger, 2011). In particular, gender and sexual minorities have faced increased risk for verbal, physical, and sexual IPV, in part, as a consequence of increased stress that perpetrators have experienced from external factors such as widespread discrimination, and from internalizing this discrimination (Duke & Davidson, 2009). To be sure, batterers with abusive personalities have used violence as a stress-release mechanism in both heterosexual and same-sex relationships (Balsam & Szymanski, 2005; Cano & Vivian, 2001), but this has been especially salient among gender and sexual minorities. These individuals have been repeatedly exposed to bias, discrimination, and homophobia from the general public which places strain on an intimate relationship and enhances vulnerability to violence (Balsam & Szymanski, 2005; Messinger, 2011).

Characteristics of Same-Sex IPV Perpetrators

Research has highlighted the overlap in characteristics of same-sex abusers as compared with their heterosexual counterparts. Perpetrators have tended to rely on emotional and psychological manipulation strategies to degrade and oppress intimate partners (Rohrbaugh, 2006). This illustrates that domestic violence has remained an exercise of power and control over the subordinate partner in a relationship (Rohrbaugh, 2006). Regardless of sexual orientation, perpetrators of IPV have reported mental health problems and histories of childhood maltreatment (Island & Letellier, 1991). Specifically, Farley (1996) found that, among 119 gay men and 169 lesbian women from 1986 to 1991, 87 percent of male perpetrators and 94 percent of female perpetrators had records of previous psychiatric treatment for offending behavior. Gender and sexual minorities have also faced increased risk for lifetime IPV victimization as a consequence of sexual orientation (Calton et al., 2015). Some abusers within the gender and sexual minority community have reported a fragile sense of identity, fears of abandonment, and loss of control in their own lives (Island & Letellier, 1991). Similar to heterosexual abusers, perpetrators felt powerless and used violence and coercion to assert authority in their relationships (Miller, Greene, Causby, White, & Lockhart, 2001; Poorman & Seelau, 2001).

While IPV victimization exerts a tremendous physical and emotional toll regardless of sexual orientation, sexual minorities face additional adverse consequences including *internalized homophobia* (Szymanski, Kashubeck-West, & Meyer, 2008) and *stigma consciousness* (Carvalho et al., 2011; Meyer, 2003). Internalized homophobia occurs when an individual has assumed society's negative view regarding sexual minority orientation. The individual as-

sociates these negative thoughts with their identity as a homosexual person. The inability to cope with emotions has produced violence as a stress-management tool (Cano & Vivian, 2001). Stigma consciousness is experienced when individuals from the LGBT community expect to be stereotyped and discriminated by others due to their sexual orientation (Pinel, 1999). Internalized homophobia and stigma consciousness have produced negative mental health outcomes such as depression, anger, confusion, stress, difficulty with family, and problems at work (Meyer, 2003; Szymanski et al., 2008). Lewis and colleagues (2006) found, for example, that stigma consciousness was associated with internalized homophobia, physical symptoms such as faintness, migraine or headache, cold or cough, diarrhea, and intrusive thoughts for lesbian women unable to talk about sexual orientation for fear of identifying themselves as members of a stigmatized group. Finally, these adverse health effects combined with fear of being “outed” highlight the need to increase scholarly attention directed toward same-sex IPV victims in order to address misperceptions and improve service provision (Calton et al., 2015; Duke & Davidson, 2009).

Same-Sex IPV Victimization Disclosure

Disclosing victimization to family and friends and formal support providers, such as police and counseling professionals, has the capacity to mitigate the trauma associated with violence if victims receive empathic responses and validation. Victims of IPV have faced barriers to disclosure when attempting to leave abusive partnerships as a result of stigma surrounding relationship violence and fear of secondary victimization by service providers and system professionals. Same-sex victims, in particular, have been reluctant to disclose victimization for fear of being discredited, blamed, and mistreated (Fountain & Skolnik, 2007). Fear of disclosure has been the result of inherent vulnerability as a sexual minority and consequences that result from seeking help (Edwards, Sylaska, & Neal, 2015), such as being “outed” (Wolff & Cokely, 2007). Research has documented that same-sex IPV victims have experienced discrimination and prejudice from the criminal justice system following disclosure (Calton, Cattaneo, & Gebhard, 2015; Oswald, Fonseca, & Hardesty, 2010; St. Pierre & Senn, 2010).

Regardless of sexual orientation, however, IPV victims have been more likely to disclose to informal support systems such as friends and family than to formal support providers like police or social service agencies (Edwards et al., 2015; McClennen, Summers, & Vaughan, 2002). Gender and sexual minority victims have reported that disclosure to friends was more helpful than disclosure to formal providers as informal networks were less likely to respond with blame and more likely to exhibit compassion (Irwin, 2008; McClennen et al., 2002; Merrill & Wolfe, 2000) — both of which have produced positive outcomes, such as decreased likelihood of PTSD and increased post-traumatic growth.

Implications for Policy and Practice

The victimization of same sex partners has been generally overlooked by the criminal justice system, victim service organizations, and social policies due to the traditional assumption that IPV is a heterosexual woman’s problem. To be sure, sexual minorities have been perceived as more culpable compared to their heterosexual counterparts because they have failed to fit the stereotypical profile of a “true” victim (Brown & Groscup, 2009; Cormier & Woodworth, 2008). This has resulted in limited resources devoted to and tailored specifically for gender and sexual minorities as compared to their heterosexual counterparts (Balsam & Szymanski, 2005; Messinger, 2011).

Existing Programs for Same-Sex IPV Survivors

Currently, there is significant demand for comprehensive services specifically tailored to the unique needs and experiences of gender and sexual minorities involved in domestically violent relationships (Calton et al., 2015; Mobley, Buford, & Seaman-DeJohn, 2007). While much of the research has demonstrated limitations in available resource provision, promising avenues in programming have produced limited resources for gender and sexual minorities. Indeed, services are available and accessible through the national and state domestic violence hotlines and coalition websites. To be sure, a model program that is comprehensive in focus, treatment, and resource allocation has been missing. Recognizing this shortcoming, advocacy organizations and community programs in Texas have begun to provide services to same-sex IPV victims.

The Family Place, located in Dallas, Texas offers:

- Safe housing
- Counseling for adult survivors and their children
- Battering intervention training programs
- Legal services
- Resources to safely escape from their abusers (The Family Place, 2016).

Further, The Family Place has opened the first male-only shelter in the Dallas area that provides shelter and protection for battered men and their children (The Family Place, 2016).

The LGBT Initiative, operated by the Texas Advocacy Project, has offered legal services to same-sex IPV survivors. These have included:

- Free legal assistance
- Resources to obtain protective orders (Texas Advocacy Project, 2016).

Finally, The Texas Council on Family Violence, located in Houston, Texas, has created the LGBT Caucus to provide services including:

- Information on the dynamics of IPV within same-sex relationships
- Open dialogue regarding the stigma associated with sexual minority orientation
- Prosocial discussion regarding the definition and consequences of homophobia
- Relevant tools to encourage service utilization among LGBT IPV victims (Texas Council on Family Violence, 2016).

Enhancing Service Delivery

In spite of the advances discussed here, a lack of exhaustive resources for same-sex IPV survivors has undermined progress. To combat these shortcomings, it is imperative that criminal justice actors (e.g., police, prosecutors, and judges) and victim service providers receive cultural sensitivity training to encourage appropriate response to same-sex victimization disclosure that can produce healing and promote prosocial outcomes. Additionally, advocates and criminal justice professionals would benefit significantly from psychoeducation and training that focuses on the prevalence of IPV within the gender and sexual minority community, the seriousness of violence and the effects this has on relationships and individual mental and physical health, and more generally, the dynamics of homosexual relationships.

Furthermore, the importance of empathic and compassionate response to help-seeking among same-sex IPV victims must be underscored. Awareness of the negative outcomes produced as a result of prejudice and discrimination may facilitate change in the way same-sex victims experience advocacy and criminal justice responses. Awareness initiatives can decrease these discriminatory responses and the blame that has historically been attributed to same-sex IPV victims by service providers. Such initiatives may also increase the identification and appropriate referral of service provision and resource allocation for victims within the gender and sexual minority community.

Public awareness campaigns are necessary to address widely held stereotypes among the public and formal service providers in terms of homophobia. Effectively changing perceptions may enhance appropriate response to disclosure of victimization. Indeed, sexual minorities have been reluctant to seek help due to the fear of experiencing adverse consequences after acknowledging their gender or sexual minority status (Edwards, Sylaska, & Neal, 2015). Facilitating help-seeking behavior among same-sex IPV victims remains a priority in order to fully address unique needs and provide resources that can heal a host of psychological and physical symptoms post-victimization to bolster and encourage post-trauma recovery (Balsam & Szymanski, 2005; Messinger, 2011).

Conclusion

Same-sex IPV is a significant social problem that has recently gained attention in the United States. With the recent legalization of same-sex marriage, increased efforts are being made to better understand interpersonal violence within this marginalized population (*Obergefell v. Hodges*, 6459). Additional effort is necessary, however, to fully comprehend the complex nature of homosexual relationships, identify causes of violence derived from internal and external factors, and recognize the unique social, medical, and psychological needs of sexual minorities. Several progressive initiatives have been established in Texas-based advocacy organizations. Together, these programs contain the blueprint for continued attention and the evolution of adapting comprehensive appropriate resources for same-sex IPV survivors. Finally, the importance of education and awareness programs for both service providers and the general public is underscored as a necessity to counter the negative stigma, homophobic attitudes, and discriminating responses toward sexual minorities.

References

- Abrams, D., Viki, G.T., Masser, B., & Bohner, G. (2003). Perceptions of stranger and acquaintance rape: the role of benevolent and hostile sexism in victim blame and rape proclivity. *Journal of Personality and Social Psychology*, *84*, 111-125.
- Balsam, K.F., & Szymanski, D. (2005). Relationship quality and domestic violence in women's same-sex relationships: the role of minority stress. *Psychology of Women Quarterly*, *29*, 258-269.
- Barnes, P.G. (1998). It's just a quarrel. *Journal of the American Bar Association*, *24*-25.
- Bayer, R. (1987). *Homosexuality and American psychiatry: The politics of diagnosis* (Rev. ed.). Princeton, NJ: Princeton University Press.
- Blosnich, J.R., & Bossarte, R.M. (2009). Comparisons of intimate partner violence among partners in same-sex and opposite-sex relationships in the United States. *American Journal of Public Health*, *99*, 2182-2184.
- Brown, M.J., & Groscup, J.L. (2009). Perceptions of same-sex domestic violence among crisis center staff. *Journal of Family Violence*, *24*(2), 87-93.
- Burke, L.K., & Follingstad, D.R. (1999). Violence in lesbian and gay relationships: Theory, prevalence, and correlational factors. *Clinical psychology review*, *19*, 487-512.
- Burke, T.W., Jordan, M.L., & Owen, S.S. (2002). A cross-national comparison of gay and lesbian domestic violence. *Journal of Contemporary Criminal Justice*, *18*, 231-256.
- Calton, J.M., Cattaneo, L.B., & Gebhard, K.T. (2015). Barriers to help seeking for lesbian, gay, bisexual, transgender, and queer survivors of intimate partner violence. *Trauma, Violence, & Abuse*, 1-16.
- Cano, A., & Vivian, D. (2001). Life stressors and husband-to-wife violence. *Aggression and Violent Behavior*, *6*, 459-480.
- Cannon, C. & Buttell, F. (2015). Illusion of inclusion: The failure of the gender paradigm to account for intimate partner violence in LGBT relationships. *Partner Abuse*, *6*, 65-77.
- Carvalho, A.F., Lewis, R.J., Derlega, V.J., Winstead, B.A., & Viggiano, C. (2011). Internalized sexual minority stressors and same-sex intimate partner violence. *Journal of Family Violence*, *26*, 501-509.

- Cormier, N.S., & Woodworth, M.T. (2008). Do you see what I see? The influence of gender stereotypes on student and Royal Canadian Mounted Police (RCMP) perceptions of violent same-sex and opposite-sex relationships. *Journal of Aggression, Maltreatment & Trauma, 17*, 478-505.
- Dicker, R. (2008). *A history of U.S. feminisms*. Berkeley, CA: Seal Press.
- Duke, A., & Davidson, M.M. (2009). Same-sex intimate partner violence: Lesbian, gay, and bisexual affirmative outreach and advocacy. *Journal of Aggression, Maltreatment & Trauma, 14*, 795-816.
- Edwards, K.M., Sylaska, K.M., & Neal, A.M. (2015). Intimate partner violence among sexual minority populations: A critical review of the literature and agenda for future research. *Psychology of Violence, 5*, 112-121.
- Elliott, P. (1996). Shattering illusions: Same-sex domestic violence. *Journal of Gay and Lesbian Social Services, 4*, 1-8.
- Farley, N. (1996). A survey of factors contributing to gay and lesbian domestic violence. *Journal of Gay & Lesbian Social Services, 4*, 35-42.
- Fountain, K., & Skolnik, A.A. (2007). *Lesbian, gay, bisexual and transgender domestic violence in the United States in 2006: A report of the National Coalition of Anti-Violence Programs*. National Coalition of Anti-Violence Programs.
- Freedman, E.B. (2002). *No turning back: The history of feminism and the future of women*. New York: Ballantine Books.
- Harris, R.J., & Cook, C.A. (1994). Attributions about spouse abuse: It matters who the batterers and victims are. *Sex Roles, 30*, 553-565.
- Hassouneh, D., & Glass, N. (2008). The influence of gender role stereotyping on women's experiences of female same-sex intimate partner violence. *Violence Against Women, 14*, 310-325.
- Herek, G.M. (2004). Beyond "homophobia": Thinking about sexual prejudice and stigma in the twenty-first century. *Sexuality Research and Social Policy, 1*, 6-24.
- Irwin, J. (2008). (Dis)counted stories: Domestic violence and lesbians. *Qualitative Social Work: Research and Practice, 7*, 199-215.
- Island, D., & Letellier, P. (1991). *Men who beat the men who love them: Battered gay men and domestic violence*. New York: Routledge.
- Johnson, B.E., Kuck, D.L., & Schander, P.R. (1997). Rape myth acceptance and sociodemographic characteristics: A multidimensional analysis. *Sex Roles, 36*, 693-707.
- Johnson, H. (2000). The role of alcohol in male partners' assault on wives. *Journal of Drug Issues, 30*, 725-741.
- Kay, M., & Jeffries, S. (2010). Homophobia, heteronormativity, and hegemonic masculinity: Male same-sex intimate partner violence from the perspective of Brisbane service providers. *Psychiatry, Psychology and Law, 17*, 412-423.
- Lewis, R.J., Derlega, V.J., Clarke, E.G., & Kuang, J.C. (2006). Stigma consciousness, social constraints, and lesbian well-being. *Journal of Counseling Psychology, 53*, 48-56.
- Little, B., & Terrance, C. (2010). Perceptions of domestic violence in lesbian relationships: Stereotypes and gender role expectations. *Journal of homosexuality, 57*, 429-440.
- Martin, D. (1976). *Battered Wives*. Volcano, CA: Volcano Press.
- McClennen, J. C., Summers, A. B., & Vaughan, C. (2002). Gay men's domestic violence: Dynamics, help-seeking behaviors, and correlates. *Journal of Gay & Lesbian Social Services, 14*, 23-49.
- Merrill, G.S., & Wolfe, V.A. (2000). Battered gay men: An exploration of abuse, help seeking, and why they stay. *Journal of Homosexuality, 39*, 1-30.
- Messerschmidt, J. (2004). Varieties of real men. *Men's lives*, 3-20.
- Messinger, A. (2011). Invisible victims: Same-sex IPV in the National Violence Against Women Survey. *Journal of Interpersonal Violence, 26*, 2228-2243.
- Meyer, I.H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*, 674-697.
- Miller, D., Greene, K., Causby, V., White, B.W., & Lockhart, L.L. (2001). Domestic violence in lesbian relationships. *Women & Therapy, 23*, 107-127.
- Minton, H.L. (2002). *Departing from deviance: A history of homosexual rights and emancipatory science in America*. Chicago: University of Chicago Press.
- Murray, C.E., & Mobley, A.K. (2009). Empirical research about same-sex intimate partner violence: A methodological review. *Journal of Homosexuality, 56*, 361-386.
- Obergefell v. Hodges*, 135 S. CT. 2584, 2598 (2015).
- Oswald, R.F., Fonseca, C.A., & Hardesty, J.L. (2010). Lesbian mothers' counseling experiences in the context of intimate partner violence. *Psychology of Women Quarterly, 34*, 286-296.
- Pinel, E.C. (1999). Stigma consciousness: The psychological legacy of social stereotypes. *Journal of Personality and Social Psychology, 76*, 114-128.
- Poorman, P.B., & Seelau, S.M. (2001). Lesbians who abuse their partners: Using the FIRO-B to assess interpersonal characteristics. *Women & Therapy, 23*, 87-105.
- Poorman, P.B., Seelau, E.P., & Seelau, S.M. (2003). Perceptions of domestic abuse in same sex relationships and implications for criminal justice and mental health responses. *Violence and Victims, 18*, 659-669.
- Ristock, J.L. (2003). Exploring dynamics of abuse lesbian relationships: Preliminary analysis of a multisite, qualitative study. *American Journal of Community Psychology, 31*, 329-341.
- Rohrbaugh, J.B. (2006). Domestic violence in same-gender relationships. *Family Court Review, 44*, 287-299.
- St Pierre, M., & Senn, C. Y. (2010). External barriers to help-seeking encountered by Canadian gay and lesbian victims of intimate partner abuse: An application of the barriers model. *Violence and Victims, 25*, 536-552.
- Szymanski, D., Kashubeck-West, S., & Meyer, J. (2008). Internalized heterosexism: Measurement, psychosocial correlates, and research directions. *The Counseling Psychologist, 36*, 525-574.
- Texas Advocacy Project. (2016). *LGBT Initiatives*. Retrieved from <http://www.texasadvocacyproject.org/search.php?search=lgbt>.
- Texas Council on Family Violence. (2016). *Lesbian, Gay, Bisexual, and Trans (LGBT) Caucus*. Retrieved from <http://tcfv.org/membership/caucuses-ally-groups-and-networks-cans/lesbian-gay-bisexual-and-trans-lgbt-caucus/>.
- The Family Place. (2016). *Our Services*. Retrieved from <http://www.familyplace.org/>.
- Violence Against Women Office. (1996). *The Violence Against Woman Act fact sheet*. Retrieved from <http://www.usdoj.gov/vawo/vawafct.html>.
- Wasarhaley, N.E., Lynch, K.R., Golding, J.M., & Renzetti, C.M. (2015). The impact of gender stereotypes on legal perceptions of lesbian intimate partner violence. *Journal of Interpersonal Violence, 1-24*.
- Wolff, K. B., & Cokely, C. L. (2007). To protect and to serve?: An exploration of police conduct in relation to the gay, lesbian, bisexual, and transgender community. *Sexuality and Culture, 11*, 1-23.

RESOURCES

Gay and Lesbian National Hotline: 1-888-843-4564

National Coalition Against Domestic Violence: <http://www.ncadv.org/>

National Domestic Violence Hotline (including same sex relationships): 1-800-799-SAFE

Texas Council on Family Violence: <http://www.tcfv.org/>

The Montrose Center (Texas LGBT Resource Center): 713-529-0037

Relevant Readings

Renzetti, C.M., & Miley, C.H. (Eds.) (1996). *Violence in gay and lesbian domestic partnerships*. Binghamton, NY: Harrington Park Press

Leventhal, B., & Lundy, S.E. (Eds.) (1999). *Same-sex domestic violence: Strategies for change*. Thousand Oaks, CA: Sage Publications.

Girshick, L.B. (2002). *Woman-to-woman sexual violence: Does she call it rape?* Northeastern Series on Gender, Crime, and Law. Northeastern University Press.

Kaschak, E. (Ed.) (2012). *Intimate betrayal: Domestic violence in lesbian relationships*. Binghamton, NY: Howorth Press, Inc.

AUTHORS

Hae Rim Jin, M.A. is a third-year doctoral student in the Department of Criminal Justice and Criminology at Sam Houston State University. She has a master's degree in forensic psychology from John Jay University and was the Voices Lecture Series Coordinator for the Crime Victims' Institute at Sam Houston State University in 2015. Her research interests include violence against women, intimate partner violence, and the victimization of gender and sexual minorities.

Cortney A. Franklin, Ph.D. is an Associate Professor in the Department of Criminal Justice and Criminology at Sam Houston State University and the Assistant Director of the Crime Victims' Institute. Her research focuses on victimology and violence against women. Her recent work has appeared in *Violence Against Women*, *Feminist Criminology*, *Women and Criminal Justice* and *Journal of Crime and Justice*.

Crime Victims' Institute Advisory Board

Victoria Camp, Austin
Consultant

Dottie Carmichael, College Station
Texas A&M University

Blanca Burciaga, Ft. Worth
Director, Victim Assistance Unit

Stefani Carter, Austin

Robert Duncan
TTU System Chancellor

Ana Estevez, Amarillo
District Judge

Rodman Goode, Cedar Hill
Law Enforcement Teacher

Ann Matthews, Jourdanton
Domestic Violence

Henry Porretto, Galveston
Chief, Galveston Police Department

Geoffrey Puryear, Georgetown
District Attorney

Richard L. Reynolds, Austin
Psychotherapist

Stephanie Anne Schulte, El Paso
ICU Nurse

Jane Shafer, San Antonio
San Antonio PD Victim Liaison

Debbie Unruh, Amarillo
Captain, Randall County Sheriff's Office

Ms. Mary Anne Wiley, Austin
Office of the Governor

Mark Wilson, Fort Worth
Police Officer, Fort Worth Police Department

Texas State University System Board of Regents

Dr. Jaime R. Garza, Chairman
San Antonio

Rossanna Salazar, Vice Chairman
Austin

Charlie Amato
San Antonio

Vernonica Muzquiz Edwards
San Antonio

David Montagne
Beaumont

Vernon Reaser III
Bellaire

William F. Scott
Nederland

Alan Tinsley
Madisonville

Donna Williams
Arlington

Spencer Copeland
Student Regent, Huntsville

Brian McCall
Chancellor

We're on the web

www.crimevictimsinstitute.org