



Guidance for multi-agency forums: LGBT+ people

Aim of this report

This report relates to victims/survivors of domestic abuse identifying as Lesbian, Gay, Bisexual, or Trans (LGBT) plus. We use the term plus to denote the spectrum of sexual and gender identities that people have. These may include, but are not limited to polysexual, pansexual, queer, asexual, non-binary, intersex, and genderqueer.

Those who identify as LGBT+ and who are experiencing domestic abuse have historically formed part of a 'hidden' group, by which we mean a social group which is less well engaged or served by the standard response to domestic abuse. Groups that are not reached by services become invisible and their needs less well understood. It is vital therefore, to focus on how LGBT+ people's experiences might be similar or different, and to identify any unique risks and needs and the additional barriers to support that they may face.

The National Scrutiny Panel brought together a range of people with expertise in the LGBT+ sector and with experience of multi-agency responses to domestic abuse. Together they looked at four cases of domestic abuse involving LGBT+ victims at high risk and/or perpetrators of domestic abuse. Their remit was to examine the information shared and the actions taken by the multi-agency groups that had originally heard these cases. The panel were able to draw out good practice and areas for development, and the lessons learned have helped to formulate the recommendations in this report.

Those who are LGBT+ are not homogenous groups. It is essential that the points raised in this report are taken as *indicative* not as comprehensive and that practitioners always seek to understand the unique experiences and identities of the people they support.

Language

Language is fluid, we also know that the use of certain terms is disputed and can be cause for concern. In this document we use the definitions provided by **Stonewall**. Neither they nor we use any term pejoratively. We keep our use of language under close review.

Common themes arising

1. Low levels of identification

- The SafeLives' national dataset¹ shows just 2.5% of the victims/survivors accessing support from Insights domestic abuse services identified as being LGBT+². In addition, only 1.0% of cases discussed at Marac were noted to involve LGBT+ victims/survivors³. We are not certain on population numbers of LGBT people; estimates need to be treated with caution and more research is needed. Current estimates suggest that between 2.5% and 5.8% of the UK population identifies as LGB (not including T)⁴, although many think 2.5% to be an underestimation. Therefore, Maracs and domestic abuse services should expect more than 2.5% of referrals to be for LGBT+ people. Wider research also suggests that some groups (for instance trans men and women⁵) experience domestic abuse at a higher rate than others in the population, and therefore we might expect LGBT+ victims and survivors to make up an even higher percentage of clients.
- There are notable exceptions to national trends; Brighton and Hove have much higher rates of identification of LGBT+ victims compared to the national dataset as a whole. This may be because LGBT+ people are very visible in the Brighton and Hove community and there are specialist LGBT+ services.
- Identification of LGBT+ victims of domestic abuse starts with the coordinated community response. We recommend that all agencies feeding into Marac and other multi-agency forums such as Mappa, review their protocols for recording relationship status and for monitoring sexual orientation and gender identity. The LGBT Foundation has published a good practice guide to monitoring sexual orientation⁶ and to monitoring gender identity⁷.
- The Scrutiny Panel felt that it was unsurprising that there is often difficulty in engaging LGBT+ victims/survivors of domestic abuse due to the distrust LGBT+ people can have in mainstream services. The panel saw parallels in the themes raised by the cases looked at, and previous Domestic Homicide Reviews. Specifically, they highlighted lack of engagement of LGBT+ service users, low levels of reporting and a lack of confidence in the police. Specific issues, such as substance misuse and mental health issues, may also be critical factors for some LGBT+ victims/survivors.
- Those experiencing domestic abuse are most likely to speak to informal networks in the first instance. It is therefore important for Maracs to recognise the importance of awareness-raising and initiatives specifically targeted at LGBT+ victims/survivors who are reluctant to approach services.
- We recommend that domestic abuse workers and other practitioners seek guidance from a local LGBT+ specialist service or a national service such as Galop when struggling to engage an LGBT+ client.
- It is important that LGBT+ services are equipped to respond appropriately to disclosures of domestic abuse. We recommend that strategic boards reach out to LGBT+ services to offer training and guidance to enhance their response and to create quality referral pathways.

¹ Insights all-roles dataset 2016/17 (unpublished). Insights data provides a profile of victims and survivors who are identified and referred to services, or who seek support themselves, but may not reflect the profile of the wider population of victims and survivors (i.e. those not visible to services).

² Data relates to 30,559 victim/survivor cases between 01/04/2014 and 31/03/2017. 2.5% represents 754 individuals.

³ Data relates to the period 01/10/2016 – 30/09/2017

⁴ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/585349/PHE_Final_report_FINAL_DRAFT_14.12.2016NB230117v2.pdf

⁵ <https://www.stonewall.org.uk/sites/default/files/lgbt-in-britain-trans.pdf>

⁶ <https://lgbt.foundation/policy-research/sexual-orientation-monitoring-guide>

⁷ <https://lgbt.foundation/monitoring>

- The panel highlighted that Police recording practices may not clearly identify domestic abuse where the parties are of the same gender. Greater Manchester Police have devised a coding system to tackle this issue⁸.
- The panel highlighted that multi-agency fora should note that LGBT+ people are very unlikely to report domestic abuse to the police and therefore when this happens it suggests that the abuse has reached a critical point.
- We noted through the case selection process that documentation relating to Marac may not offer a prompt to practitioners to clearly record a person's sexual orientation or gender identity as reported by the individual themselves. This may lead to assumptions being made and decreased visibility for some groups. We recommend that all Maracs review their documentation and recording practices⁹.
- It is important to recognise that it will not only be self-identified LGBT+ people that need to access specialist support. The Scrutiny Panel discussed a case in which a cisgender, heterosexual young woman was in a relationship with a trans man. The panel felt it was significant that she had no specialist support from LGBT+ services who would have an understanding of the challenges she may be facing.

2. Dual allegations

- It was noted by the panel that Maracs receive repeat referrals in which the identification of the victim/survivor and of the perpetrator is unclear, or changes over time e.g. the victim/survivor is subsequently labelled as the perpetrator. This suggests that agencies are struggling to properly assess the dynamics within that relationship.
- Responding to domestic abuse as individual incidents rather than considering the overall pattern of violence and abuse, including the presence of coercive control, can prevent a proper assessment of who is at risk and from whom. It may be that professionals do not accurately identify a victim/survivor over a number of incidents, leading to confusion and misidentification. Alternatively, violence may be used by a victim/survivor against the perpetrator as a means of defence or as an attempt to resist coercion¹⁰.
- There is a risk that practitioners assign victim/survivor and perpetrator status based on a hetero-centric model of domestic abuse in which the person perceived to be physically stronger or who is perceived to present in a more masculine or 'butch' way is automatically considered to be the aggressor. The police, having often a very short time frame in which to decide who to arrest at the scene of an incident, need to be particularly vigilant about making assumptions based on stereotypes. There is also a risk that agencies try and manage this issue by working with the first person who makes a report. While agencies need to take appropriate measures to ensure information is compartmentalised, it is not appropriate to make a judgement on counter-allegations on the basis of when someone reported.
- The panel highlighted that primary victim/survivors do not necessarily identify as such because they, like others in society, believe that victim/survivors are passive and/or weak and defenceless. They may see themselves as active participants trying to manage their relationship and their abusive partner – who they might also see as emotionally weaker than they are and who they feel responsible for.¹¹

⁸ <https://recordings.join.me/lzA3SXFm0e5Pajr7hRDbA>

⁹ <http://www.safelives.org.uk/sites/default/files/resources/MARAC%20referral%20form%20FINAL.doc>

¹⁰ https://recordings.join.me/J_FSbF2UNUafDJut71XA8w

¹¹ Donovan, C. & Hester M. (2008) 'because she was my first girlfriend, I didn't know any different': Making the case for mainstreaming same-sex sex/relationship education. *Journal of Sex Education*, Vol 8(3): 277-287

- The panel stressed that wrongly assigning perpetrator status could have implications for that person in terms of their access to support. It is not good practice to treat a known primary victim/survivor as a perpetrator even if they may have used violence on a particular occasion.
- We recommend that multi-agency fora such as Marac and Mash make careful assessments informed by good information sharing and an understanding of typologies of domestic abuse. Where there is ambiguity, a more thorough and complete assessment of the power dynamics should be undertaken. This should usually include a 'Who Does What to Whom' assessment. Idvas will usually be best placed to undertake further assessment. All Idva services should have a policy in place to guide practitioners when managing cases of dual allegations. Respect¹² has produced a toolkit containing a useful framework for practitioners to guide their thinking.
- The SafeLives Dash is suitable for risk assessment with LGB or T+ victim/survivor of domestic abuse, but practitioners must consider the additional risks and needs that an LGB or T+ client could be facing. Stonewall Housing has produced an LGBT specific risk tool which can be used alongside the Dash.

3. Isolation

- Our Insights data showed LGBT+ victim/survivors accessing domestic abuse services are more likely to have experienced historic abuse, compared to those who do not identify as LGBT+. This includes previous abuse from a family member (6% vs 3%), direct abuse as a child/young person (7% vs 2%) and exposure to domestic abuse as a child/young person (7% vs 2%). Some victim/survivors will therefore have a reduced network of support. In this context, the significance of their abusive partner as an ally is heightened.
- Some LGBT+ people are fleeing from or have been rejected by their families. This may mean, particularly for young people, that they have moved to an unknown area and now have a limited support network. In some cases, the only link they have to that area and to the local LGBT+ 'scene' and/or networks is through the perpetrator. Particularly cities may have a reputation of being more LGBT+ friendly and are areas to which people are drawn. Some LGBT+ people form strong 'families of choice' as a way of coping with possible or actual rejection by their family of origin for being open about their sexual orientation or gender identity. The importance of these relationships to the victim/survivor may not be readily appreciated by non-specialist practitioners. Marac action planning should avoid the heteronormative expectation that victim/survivors will seek support from family and should consider how to support the victim/survivor's access to vital support networks. Maracs should understand how remaining in particular geographical locations may feel safer to LGBT+ victim/survivors of domestic abuse, despite their proximity to the perpetrator.
- In some cases, there is a risk of so-called 'honour'-based abuse and/or forced marriage¹³. For more information please refer to our [Spotlight series](#).
- The panel discussed the ways in which abusive LGBT+ people might use their better knowledge and/or experience of the local LGBT+ scene as a way of controlling their partner. This might be especially the case when the victim/survivor is in their first relationship as an LGBT+ person. The consequences of this might be that they are kept away from other LGBT+ people. This allows abusive partners to set the norms for behaviour – 'this is what our relationships are like', 'this is what gay men do', 'it's normal to do this when you're a lesbian', 'trans women should behave like this'.¹⁴

¹² <http://respect.uk.net/wp-content/uploads/2017/01/Toolkit-for-Work-with-male-victims-of-DV-2nd-ed.-Respect©-2013.pdf>

¹³ Galop casework statistics 2013-2017 (n-626) record almost 10% of all clients being at potential risk of honour based violence and / or forced marriage.

¹⁴ . Donovan, C. & Hester M. (2008) 'because she was my first girlfriend, I didn't know any different': Making the case for mainstreaming same-sex sex/relationship education. *Journal of Sex Education*, Vol 8(3): 277-287.

- Social and structural homo/bi/transphobia can create an environment in which a relationship with someone you feel allied to is extremely important. Victim/survivors may feel unsafe in their neighbourhood and/or unable to be their whole self in public. In this context, an abusive relationship may feel like a place of relative safety. This can make it more challenging for LGBT+ people to name coercive control in their relationship and easier for controlling individuals to exploit the isolation that the victim/survivor may already be feeling. Marac action planning should consider the relative risks posed to a victim/survivor in moving away from the perpetrator into an unknown area and consider the fear of hate crime/incidents that the victim/survivor may have.
- It was noted that in most of the cases looked at by the Panel, victim/survivors and perpetrators lived, worked and socialised across different local authorities/Marac areas. Sometimes several local authorities were referenced in the case. In some instances, this created gaps in the information that agencies shared. We recommend that where this is a consideration, all agencies ensure that they are seeking information from their counterparts in other areas to inform their assessments. Our Marac to Marac transfer guidance can assist Maracs¹⁵.
- Identity abuse can be experienced by any victim/survivor of domestic abuse and it is particularly important in how abusive partners coercively control LGBT+ victim/survivors. This can happen in various ways including in relation to being outed. Other ways can include normalising violent/abusive behaviours, controlling the presentation of self of a victim, implying or insisting a victim/survivor behave like a 'real' LGBT+ person and/or undermining or insulting them for not behaving like a 'real' LGBT+ person. Further examples of identity abuse appear throughout the rest of this document.

4. Cultural competency

- The panel highlighted the importance of practitioners who are supporting LGB and T+ victim/survivors or perpetrators of domestic abuse to become 'culturally competent'. The panel suggested that a lack of understanding of LGBT+ lives can create barriers for people to disclose domestic abuse to mainstream agencies.
- There are tangible ways in which areas of risk may go undetected should an assessment be made without an understanding of cultural norms for *some* LGBT+ people. A hetero or cis normative approach to risk assessment and safety planning will not provide the most comprehensive support plan. Examples of this include the prevalence of using dating apps such as Grindr or Findhrr and the subculture of the chemsex scene. These differences can be very significant in terms of risk. Analyses of homicides of gay and bisexual men where hook-up apps were used, have shown victim/survivors who were not out and connecting with their abusers through apps in secret.
- It was evident in the discussion of Marac cases that knowledge of these specific issues were limited among generic services. This could potentially mean a less effective response to a victim/survivor but could also mean that Maracs do not identify others at risk. It is essential to draw on the expertise of specialist LGBT+ services when relevant cases are being heard at Marac.
- Maracs should consider ways of engaging with marginalized victim/survivors such as utilising a Police LAGLO (Lesbian and Gay Liaison Officer), also known in some areas as LGBT+ liaison officers. LGBT+ officers must be given specialist training in responding to domestic abuse.

¹⁵ <http://www.safelives.org.uk/sites/default/files/resources/MARAC-to-MARAC%20referral%20FAQs%20FINAL.pdf>

5. Young people

- The national LGBT+ domestic abuse helpline receives an unusually high number of calls from young people¹⁶. There appears to be a particular vulnerability for young adults questioning their gender identity and/or sexual orientation. Several studies have suggested that LGB&T young people are at higher risk of physical, emotional and sexual violence compared to heterosexual and cisgender people. The multi-agency response to young LGBT+ people should include consultation with or referral to LGBT+ specific organisations.
- There are particularly concerning statistics regarding the mental health of young LGBT+ people¹⁷. It is essential that Maracs have representation from Mental Health services.
- Young LGBT+ people may not be out to their parents or to peers and may be secretive about their identity. This can put them at risk of targeting for sexual exploitation and grooming. Multi-agency fora need to be alert to this risk that a young victim/survivor is facing.

6. Risk and specific forms of abuse

- Practitioners should bear in mind that historically the media has presented sexual orientation and gender identity as a 'risky' lifestyle choice and LGBT+ people are spoken about in terms of their culpability for any harm they may have experienced¹⁸. Therefore, it is particularly important when discussing risk with LGBT+ clients to demonstrate that you are non-judgemental.
- Multi-agency forums should be particularly sensitive to the fact that sharing information about any LGBT+ victim/survivor or perpetrator may out them to another service or professional.
- Practitioners should consider whether this is the victim/survivor's first same sex relationship. Research indicates (Donovan et al, 2006) that a person's first same sex relationship is a high risk time for domestic abuse to begin.
- The SafeLives national dataset shows that LGBT+ victim/survivors are almost twice as likely to be abused by multiple perpetrators. They may be at risk from current or ex-partners (either heterosexual or LGBT+); and/or family members (such as a parent or sibling). Where family members and/or the wider community are identified as possible perpetrators, so-called 'honour'-based violence dynamics should be considered. Multi-agency forums should consider whether the potential of homo/bi/transphobia is presenting an opportunity for further isolation. For example, is there a risk of hate crime? Is the victim/survivor alienated from their family?
- Internalised homophobia can be a barrier to speaking out about abuse and can also be exploited by perpetrators who by virtue of an intimate relationship will know of any ambivalence felt by their partner about their sexual orientation or gender identity. As one survivor told us, *"there is a lot of shame and stigma around it. And I think it's easy to let that make you think, well, I feel bad about this, so it's okay for other people to make me feel bad about it and use it against me"*.

7. Complex needs

- All the cases looked at by the Scrutiny Panel showed both victim/survivors and perpetrators to have some level of substance use and/or mental health problem. We know that in the general population, LGBT+ people have poorer mental health rates, a likely reflection of living in a heteronormative/cisnormative society.

¹⁶ In 2017, 40% of callers were under the age of 24. Callers accessed advice, information and emotional support, and did not necessarily go on to access Idva support.

¹⁷ 48 % of Trans people under 26 said they had attempted suicide, 59% had at least considered doing so (LGBT Mental Health, Risk and Resilience Explored (RaRE) Report, 2015

¹⁸ Examples include HIV awareness campaigns and the response of Daily Mail columnist Jan Moir to the death of Stephen Gately, member of Boyzone in 2009.

- It is crucial not to pathologise LGBT+ victim/survivors of domestic abuse. Historically, LGBT+ people were regarded as psychologically abnormal and legally and medically treated as such, with devastating consequences on their liberty.
- It is also important to consider whether barriers to accessing support for domestic abuse may mean that at the point of disclosure, both the level of risk and the likelihood of complex needs is increased. The panel noted that mental health issues are often a critical issue raised in Domestic Homicide Reviews so it is vital that links are made with mental health teams.
- Multi-agency forums should create action plans being mindful of the need to have a flexible outreach support approach. Maracs also need the full participation of mental health and substance use services.
- It is important to consider intersectionality. Our Insights data showed LGBT+ victim/survivors who are accessing a domestic abuse service are more likely to have a disability (21% vs 14%) compared to those who do not identify as LGBT+. This includes mental as well as physical disabilities.

8. Sexual violence

- In the cases looked at by the Panel, there were indicators of victim/survivors and/or perpetrators having experienced sexual violence/abuse. Research from the UK is limited in this respect, but US data suggests that the level of sexual violence against bisexual women is particularly high, and most often perpetrated by a former male partner.
- Lesbian victim/survivors of sexual violence report assumptions being made by health and law enforcement professionals that they are heterosexual. This puts an additional burden on a traumatised victim/survivor to come out to professionals.
- Galop reports that Trans* people are the most at risk of sexual abuse of all the LGBT+ subgroups. Trans* victim/survivors of sexual violence may feel very uncomfortable in exposing their body to anyone and Sarcs should be particularly sensitive to this.
- It is important that multi-agency forums draw on the expertise of sexual violence specialists. Specific LGBT+ ISVA services¹⁹ are rare, so when referring to a service as part of the Marac action plan, the referrer should check that they are LGBT+ friendly and confident in supporting the needs of these client groups.
- When a perpetrator of sexual violence has been identified, multi-agency forums such as Marac and Mappa should consider the risk to other people, in particular those who the perpetrator might target through online networks and LGBT+ scenes.

9. Gender identity

- No case looked at by the panel included a Trans victim/survivor, a reflection of the low levels of referrals for Trans people into domestic abuse services. Trans victim/survivors of domestic abuse are some of our most hidden victim/survivors.
- Many people who have transitioned may not identify as transgender, and so may not disclose this aspect of their identity in accessing services, while others may decide not to disclose due to feelings of exclusion and the fear of discrimination. The additional barriers that these clients face in accessing support must be addressed.
- Some Trans people do not identify with the LGBT+ umbrella term and so will not be accessing LGBT+ spaces or services. This is important to consider when trying to reach out to Trans victims/survivors of domestic abuse. Trans people who access

¹⁹ <https://rsvporg.co.uk/services/lgbt-advocacy/>

domestic abuse services may be in heterosexual relationships, or they may be lesbian, gay, or bisexual. Sexual orientation is often erroneously conflated with gender identity. The [Gender Unicorn](#)²⁰ resource is a useful tool for explaining these differences.

- Trans people often seek private, online or overseas treatments & surgeries. The financial burden of this can create vulnerability. For example, an abusive partner might use the promise of treatments to exploit or might coerce the victim/survivor into sex work.
- Trans people may believe that the violence and abuse they are experiencing has been *caused* by transitioning. This can create an extra layer of guilt and normalisation of abuse.
- Trans people may be particularly at risk from romance fraud, where perpetrators target individuals with the pretence of a legitimate relationship and exploit them.
- The LGBT+ domestic abuse helpline has noted Trans callers reporting significant risk from multiple perpetrators. For trans men in particular, there appears to be risk from family violence as well as from intimate partners.

10. Perpetrators

- Perpetrators of domestic abuse must always be held to account for their actions, it is also important to consider their own experiences of abuse and trauma in order to provide the most effective response. Perpetrators of domestic abuse who identify as LGBT+ are just as likely as victim/survivors of domestic abuse to have experienced homo/bi/trans phobia. Practitioners working with LGBT+ perpetrators must be able to adapt their models and approaches to be less hetero/cis normative.
- There are particular sensitivities when working with Trans perpetrators of domestic abuse. It is important to consider factors that may increase risk such as whether they are taking illegal hormone medication which can affect mood and aggression levels.
- It is not appropriate for LGBT+ perpetrators to be put onto group programmes with non LGBT+ peers. This may be unsafe and is likely to create anxiety which is not conducive to facilitating change. We recommend that agencies undertaking direct work with perpetrators seek training and guidance from Respect²¹.

Guidance for Maracs

- Establish a single point of contact with a trusted professional. This professional supports and represents the victim/survivor and leads in identifying the risks they face and addressing their needs. This is usually the Idva and in some parts of the country, the Idva service will have an LGBT+ specialist. Where this is not the case, it may be more appropriate to appoint a different lead support worker, while keeping the Idva closely involved. This might be an LGBT+ specialist that has already formed a trusting relationship with the victim/survivor. Idvas struggling to engage with LGBT+ victim/survivors should seek advice and guidance from LGBT+ specialists such as Galop.
- Maracs are most effective when they get consistent representation of all the core agencies and when those appointed representatives are senior enough to be able to confidently make

²⁰ <http://www.transstudent.org/gender>

²¹ <http://respect.uk.net/>

decisions and allocate resources on behalf of their organisation. If your Marac is unable to engage key partner agencies in the process, this should be escalated to your local governance structure to address. It is essential that each Marac, either locally or regionally, has their operational work supported by an overarching governance structure.

- Local LGBT+ organisations will have an understanding of how experiences for LGBT+ victims of domestic abuse might be similar or different, any unique risks and needs and the additional barriers to help and support they may face. It is therefore appropriate to build the capacity of these services to send a representative to Marac on an ad hoc basis for appropriate cases. This of course must be done with safety at the forefront with appropriate diligence to any conflicts of interest that can arise.
- Each new representative should be offered a full induction to the Marac process. Where it is not possible to seek local expertise, it is the role of the Idva to seek guidance from an LGBT+ organisation (such as Galop) which they can use to enhance the Marac's understanding of their client's situation.
- You can find more details on the Marac process in the **SafeLives' Marac toolkits**, including [this toolkit](#) for LGBT+ organisations.
- Marac representatives must remember that LGBT+ victim/survivors and perpetrators may not be out to everyone and so should be particularly sensitive to this when recording and sharing information.

If you are part of a Marac's strategic or governance group:

- Ensure that the Marac is properly recording (and reporting in their returns to SafeLives) the numbers of LGBT+ victim/survivors and perpetrators being discussed at Marac.
- LGBT+ victim/survivors of domestic abuse need to see themselves reflected in the services offered in order for them to have confidence. It is incumbent on mainstream services to go further than '*we are for everyone*' and to use language and imagery within their marketing that will speak to LGBT+ people. Because of the pervasiveness of homo/bi/transphobia, it is not the case that LGBT+ people will assume themselves welcome and included, simply because they are not explicitly excluded. LGBT+ people don't identify with the 'public story' of domestic abuse (Donovan & Hester, 2010). Domestic abuse is a gendered crime, but only presenting this narrative excludes the experiences of LGBT+ victim/survivors. We recommend all agencies review their domestic abuse awareness raising materials accordingly.
- Map your local LGBT+ services/organisations and reach out to them, building their capacity to identify high risk victim/survivors.
- Ensure that local Marac training has embedded key messages on LGBT+ issues.
- Consider carrying out a case audit focused on LGBT+ victim/survivors in order to look at the standard of the response they have received. SafeLives can provide you with tools to assist you to do this. You might also want to commission support from a specialist service. Ensure the Marac area records data correctly in its returns to SafeLives, so that you have a true picture of your local response and to enable proper performance management.

If you are a commissioner:

- We recommend you support the development of specialist LGBT+ domestic abuse provision locally. Where this sits within a generic domestic abuse service, the scope needs to go beyond direct work with victim/survivors and also encompass training and development work both within local statutory and third sector partners (such as health, mental health, substance use, housing) and local LGBT+ people in their networks, scene or Pride spaces.
- It is also important to recognise the funding problems in the wider LGBT+ sector, and consider the opportunities in terms of building the voluntary sector capacity more generally.

If you are domestic abuse coordinator or forum:

- Review your domestic abuse campaigns ensuring that they are cognisant of and responding to the needs of LGBT+ communities. For example, this campaign by Durham Constabulary²².
- LGBT+ victim/survivors of domestic abuse tend to access support informally through their networks rather than call on services and this could be the focus of campaigns. In the North East, the Selfies Project worked with existing young LGBT+ groups to promote 'how to be a good friend' to help LGBT+ people respond to friends experiencing abuse.²³

With thanks to Max Cohen, Prof. Catherine Donovan, Julie Fry, Beverley Higgins (RSVP)
Dr Jasna Magic (Galop), James Rowlands, Laura Russell (Stonewall), Berkeley Wilde (The Diversity Trust) and the National Scrutiny Panel members.

²² <https://www.durham.police.uk/Information-and-advice/safeguarding/Pages/Love-is-many-things.aspx>

²³ See <http://shura.shu.ac.uk/15077/>