Journal of Qualitative Criminal Justice & Criminology • 2020 | Volume 9, Issue 1

“A Victim is a Victim:” LGBT Blindness among Victim Assistance Workers

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ABSTRACT

LGBT crime victims underutilize victim assistance services because they fear secondary victimization by homophobic and insensitive workers and organizations. However, assessment of the perceptions and competence of those working with these populations is largely absent from the literature. To address this gap, we qualitatively investigated 83 victim assistance workers and administrators regarding their practices with LGBT victims. Overall, respondents believed that a victim's sexual orientation or gender identity was irrelevant, which was well-meaning but potentially perpetuated a type of LGBT cultural blindness to the needs of these populations, not dissimilar to color blindness among some white service providers toward African Americans. Participants questioned the appropriateness of asking about a victim's sexual orientation or gender identity, had not received training in working with LGBT clients, and felt compelled to hide their clients' sexual orientations and gender identities to protect them from hostility within the legal system. Implications for practice and future research are discussed.

Introduction

Gay, lesbian, bisexual, and transgender (LGBT) people are overrepresented among statistics of victims of hate crimes (Buist & Lenning, 2016; FBI, 2016; Messinger, 2020; Roberts et al., 2010). For example, Herek (2009) explored hate crime and stigma-related experiences among a sample of lesbian, gay male, and bisexual respondents (n=662). Results indicated that nearly half of the respondents had experienced verbal abuse, about 25 percent had been victims of violence, property crimes, or attempted crimes, and 23.4 percent had been threatened with violence. In the U.S., it is estimated that approximately two individuals are murdered every month because they act or look transgender (Jauk, 2013), and sexual assault and rape have been among the most documented types of violence against transgender people (Stotzer, 2009). Overall, it is believed that LGBT adults are at least as likely, and in some ways more likely to experience interpersonal violence than their heterosexual counterparts (CDC, 2013; Messinger, 2020; Murray et al., 2006/2007; Roberts et al., 2010). LGBT persons of color and/or of lower socioeconomic class may be even more at risk of becoming victims of violence (Meyer, 2015). Considering the frequency with which LGBT people are victims of crime and assault, it is reasonable to wonder what, if any, assistance they are receiving. The main objective of this paper is to describe a study of victim-assistance service providers and administrators at seven agencies to understand if, from their perspectives, the sexual orientation or gender identity of victims they served influenced the services they provided.

Service providers

Victim assistance workers ensure that victims and witnesses of crimes are treated with fairness and respect, afforded their rights, and provided with the services they need to help ease the impact of

victimization. These providers can be social workers, victim advocates, hotline workers, or volunteers, who may have a range of educational backgrounds and professional identities. They provide services that include but are not limited to, crisis intervention, emergency shelter and transportation, counseling, and criminal justice advocacy. All states and most territories receive annual victim assistance funds that support local community-based organizations and public agencies that provide services directly to victims (Office of Victims of Crime, 2013). The nature of agencies that provide victim assistance may also vary. For instance, victim assistance organizations may be private nonprofit organizations or public agencies attached to city or county district attorney's offices or prosecutors' offices.

While victim assistance providers are ethically committed to nondiscriminatory practice (National Organization for Victim Assistance, 1995), the importance they give to a client's sexual orientation or gender identity has not been examined. Because asking for a victim's sexual orientation or gender identity is not part of standard victim services practice, it is conceivable that the decision whether to ask such a question is left largely to the discretion of the individual service provider (Bjorkman & Malterud, 2007; Boehmer & Case, 2004). Such ambiguity can allow individual worker biases and prejudices to influence the client's experience within the victim assistance system. It is reasonable to assume that any bias, misconception, or nescience held by a victim assistance provider towards an LGBT victim will impact the quality and appropriateness of the professional rapport that is established as well as the services provided (Brown & Groscup, 2009; Wise & Bowman, 1997). The failure of service providers to address the needs of their LGBT clients can have dire consequences, such as alienating the client, inappropriate referrals, inaccurate processing of the case, or taking the nature of the crime less seriously (Brown & Groscup, 2009).

While almost no research could be found documenting the attitudes of victim assistance providers toward LGBT victims, some reports suggest that the helpers they come across may harbor homophobic or transphobic attitudes or may be otherwise uninformed in ways that may interfere with service delivery (Buist & Lenning, 2016; Guadalupe-Diaz, 2019; Messinger, 2020; Meyer, 2015). Simpson and Helfrich (2005), who studied provider perspectives on barriers to services for lesbian survivors of interpersonal violence (IPV), found that providers may not recognize if a client is in an intimate relationship with a same-sex partner, much less an abusive one. Other studies strongly suggest that LGBT people do not trust the police to treat them fairly, and LGBT victims of violence have reported a significant incidence of mistreatment at the hands of police officers (Buist & Lenning, 2016; Dwyer & Ball, 2012; Finneran & Stephenson, 2013; Guadalupe-Diaz, 2019). Police officers may be less likely to intercede or adequately address IPV cases that do not involve heterosexual male-perpetrated instances of domestic violence (Brown & Groscup, 2009; Messinger, 2020; Russell & Sturgeon, 2018), likely because a majority of police officers fail to recognize IPV in same sex couples (National Coalition of Anti-Violence Programs, 2014). One study of 222 police officers and civilian police employees found

that between 30 percent and 40 percent of respondents believed that a gay or lesbian victim would be treated less seriously than one who is heterosexual, and this may be related to negative attitudes and stereotypes among police officers (Bernstein & Kostelac, 2002).

In a national survey of 6,540 transgender individuals, 11 percent of transgender victims reported that they were denied treatment equal to that of a cisgender person, 12 percent were harassed or disrespected, 2 percent were physically assaulted when seeking mental health services; and 12 percent reported discrimination when pursuing legal services (Grant et al., 2011). Of those transgender victims who experienced discrimination from domestic violence shelters/programs and rape crisis centers, 11 percent reported that they may have been denied treatment equal to that of a cisgender person, 8 percent were harassed or disrespected, and 2 percent were physically assaulted.

So then, it is perhaps no surprise that LGBT victims have generally avoided more formal sources of assistance, including victim assistance agencies (Messinger, 2002) and preferred to seek help from informal sources such as friends (Hardesty et al., 2011; Hines & Douglas, 2011; Merrill & Wolfe 2000; McClennen, 2005; McClennen et al., 2002; Messinger, 2020). In a qualitative study, participants said they were only willing to access general community resources if informal supports from within the LGBT community such as friends, empowered them to do so, and/or if they could be assured that the service providers were LGBT friendly (Turell & Herrmann; 2008). However, respondents reported that it was highly unlikely that they would access non-LGBT specific community services unless they had no other options. Further, feelings of shame, or internalization of the societal stigma of being an LGBT person, may play a role in the victims' unwillingness to disclose their sexual orientation or gender identity (Todahl et al., 2009).

These studies all suggest a strong rationale as to why LGBT crime victims seek informal rather than formal sources of help. Since informal supports remain the first and often the only type of assistance sought by this population, not only do LGBT victims risk not getting the services they need, the rates of LGBT crime victimization may go largely unreported (Gentlewarrior, 2009). In turn, this makes it difficult to ascertain the true prevalence of this problem (CDC, 2013; Hein & Scharer, 2013; Pattavina et al., 2007; Tesch, et al., 2010).

Research questions

The above-mentioned findings suggest the need for further research to investigate victim assistance service-providers' attitudes and perceptions of their LGBT clients and how they might be changed to enable them to get the help they need. Therefore, the research questions for this study were: 1) how do victim assistance professionals perceive the relationship between a crime victim's sexual orientation or gender identity with the types of services that they provide; and 2) how do they perceive their cultural competence in relation to working with LGBT victims of crime?

Methods

To address these questions, we conducted a thematic analysis (Braun & Clarke, 2006; Irwin, 2012) of qualitative data gathered as part of a larger project, funded by the Office of Victims of Crime (OVC), to train victim assistance workers in seven agencies in various parts of the country to work competently with LGBT clients. Agencies applied and were approved for this project, and agency directors made participation mandatory for their employees. Pre-training baseline data were collected among victim assistance workers and administrators via focus groups and two individual interviews (when only one agency administrator was available to participate) before a training program was implemented. This study describes an analysis of these baseline data. Qualitative methodology was utilized as we were seeking thick descriptions (Geertz, 1973) of people's personal experiences of complex phenomena within particular settings in which little is known (Johnson & Onwuegbuzie, 2004; Padgett, 2017). This research was approved for human subjects by the Rutgers University institutional review board.

Data were collected from 58 victim assistance staff, 15 administrators, and 10 volunteers across seven different sites in various parts of the country. As can be seen in Appendix A and the agency descriptions in Appendix B, respondents represented a broad range of geographic, ethnic, racial, and socioeconomic groups.

Data collection

Audio-recorded focus groups of respondents were held at each site from the fall of 2013 to the spring of 2014. Data were collected using a semi-structured protocol of interview questions (Patton, 2002). Respondents were asked about how they worked with LGBT victims, what they knew about them, and also their knowledge of local services for LGBT persons (see Appendix C for interview questions). Each focus group lasted approximately 90 minutes. The two authors of this manuscript and another member of the research team with focus group experience, led the focus groups. A professional transcriber transcribed all of the audio recordings verbatim.

Data analysis

The research team applied a thematic analysis (Braun & Clarke, 2006; Guest & MacQueen, 2012) to analyze the data. Clean versions of the focus group and interview transcripts were uploaded into a file using DEDOOSE (2013) qualitative software, which allowed for qualitative coding and memo writing. Next, the second author performed line by line coding of transcripts, creating an exhaustive list of codes. Each code remained true to the respondent's words, and all codes were considered potentially theoretically relevant. The next phase of coding involved organizing the preliminary list of codes by observing what ideas and themes are repeating across transcripts as relevant to the research questions. From the refined list of codes, themes emerged under which the codes were organized. Mayring (2009) suggests that investigators tentatively develop the categorical aspects of interpretation, or initial themes from text material, and then apply them back throughout the text,

and that is what was done for this study. Individual themes, as well as the relationships between themes, were named, defined, and written up in a way that brought together the thematic analysis and data extracts to describe how the research questions were answered (Braun & Clarke, 2006).

Trustworthiness

An additional qualitative researcher with no connection to the study checked key codes and applied them to segments of the raw data to check for reliability (Rubin & Rubin, 2005). We also utilized peer debriefing, whereby we discussed the results with colleagues and practitioners to ensure that the interpretations rang true (Padgett, 2017). If any discrepancies emerged during the reliability check or peer debriefing, the two authors of this paper reviewed the coding schemes as well as the raw transcripts and consulted with the external coder and the peers until there was agreement. It is worth noting that no major disagreements emerged during these debriefing sessions.

Results

Two major themes emerged from the data analysis. The first theme, irrelevance, captures how the respondents believed LGBT identity was irrelevant to the provision of services, with subthemes of fear of client discomfort, LGBT invisibility, and lack of knowledge of referrals. The second theme describes the context of homophobia that typified the agency and surrounding systems and encompassed the subthemes of systemic and agency homophobia. The respondents' desire for training, along with a positive case example, also emerged from the data.

Irrelevance

Overall, the majority of respondents did not believe it was important to know or even to ask whether their client was LGBT if sexual orientation and/or gender identity were not directly connected to their victimization. As stated by this suburban service provider, "Unless their sexual orientation is related to the crime, I don't believe it needs to be an issue." A service provider from an urban area explained, "If I thought a victim's sexual orientation was relevant to a case, I would ask them to elaborate on the type of relationship she/he had with the defendant or another victim on a case- ONLY if it was relevant."

Another respondent working at an agency in an urban area stated,

As a victim service provider, the clients that I work with are a result of their victimization. Victimization has no sexual orientation except in bias/hate-related. Unless a person tells me what their sexual orientation is, I would have no way of knowing ... there is no need for understanding [their sexual orientation or gender identity].

Rather than ask, providers relied on the victim to disclose their sexual orientation or gender identity. The analysis revealed a common sentiment among service providers, reflected in this respondent's

assertion, "If they want me to know [if the victim is LGBT], they will tell me." As stated by this suburban service provider, "Listen! If they are willing to share—I'm not interviewing them about their sexual orientation. I'm only here to assist them as a victim of a crime."

Occasionally, LGBT clients are identified in police reports. However, the respondents' assertions suggest a lack of follow through in terms of thinking about and assessing the unique and distinctive needs of these clients:

We just go by what is on the police report. If the victim tells the police that they are gay or trans or whatever, then we have it there, so there's no need to ask them that. If they didn't tell this information to the police, then they probably don't want to tell it to us so we're not going to ask. The police are only interested in the crime, not the person's sexuality; it doesn't matter.
(suburban agency respondent)

It is important to note that the idea that "a victim is a victim" regardless of sexual orientation or gender identity, likely reflects the respondents' intentions to provide fair and equitable treatment to all clients, which of course is a laudable objective. However, it could be argued, based on the literature, that clients' whose LGBT identity and related experiences are ignored or minimized may feel misunderstood, not accepted, and may not be getting the targeted treatment they need to recover from their victimization (Brown & Groscup, 2009; Wise & Bowman, 1997)

Fear of client discomfort

Respondents did not ask victims about their sexual orientation or gender identity because they believed it was irrelevant and because they worried that doing so would feel intrusive to the client. As stated by a respondent from an urban area,

Maybe they just don't want me to know if they are gay or trans. I am not sure where the line is drawn between getting this information versus if they just want to keep this information private from me. Everyone has the right to privacy. What if me asking them makes them uncomfortable?

As stated previously, respondents were committed to providing fair and equitable treatment to their clients. However, they worried that asking about sexual orientation or gender identity might lead clients to think otherwise. As one inner-city respondent stated,

If I ask [the victim] about their sexuality or gender, they might think I would use this information to judge them ... [the victim] might wonder if I was homophobic and might think that I would give them poorer services if they [disclosed their sexual orientation or gender identity]. I think it could go that way too. So, I treat everyone the same and if they want to tell me or not, it is up to them.

In terms of the relationship between irrelevance and client discomfort, it seemed that the benefits of getting information about LGBT identity and incorporating that information into case planning might not be sufficient justification to risk potential client discomfort.

LGBT invisibility

Since workers were not asking about sexual orientation or gender identity, none of the agencies kept statistics on LGBT crime victims. Of course, as a result, it was impossible to get an accurate idea of how many LGBT people were victimized, and what type of crime they suffered. As one administrator at an urban site stated,

We have no way of knowing exactly how many LGBT people come through [our agency]. And I see this now as a problem. I know for a fact that we serve LGBT victims. I discuss cases with my staff, and I see the [victims] that come in. But actually documenting how many we work with has never been done.

Here there is a reciprocal relationship between relevance and prevalence. If agencies or professionals do not see gender identity and sexual orientation as relevant, they will not ask clients about their LGBT identities in order to maintain statistics; without such statistics, they will not fully understand the scope of the problem and the potential need for specialized services for this population.

Lack of referrals

In keeping with the notion that sexual orientation and gender identity may not be relevant and thus LGBT clients remain invisible, it is perhaps unsurprising that administrators and workers would not establish or maintain a list of appropriate resources for referrals. Most respondents used a standard resource directory that did not distinguish which resources were LGBT friendly. As one staff person at an agency in a rural area stated,

I just use the same resources for everyone; a victim is a victim. If they are victimized, they probably care more about feeling safe rather than people knowing they are gay, right?

Also, this urban service provider,

Well, if it's in the resource directory, I assume [the staff at the referral site] know how to work with all victims; it shouldn't matter. I never really called any of the resources to ask them specifically if they had experience working with LGBT victims. Again, a victim is a victim regardless of sexuality or gender. (urban service provider)

Like their staff, administrators at many organizations lacked awareness of and connection to the local LGBT community. A repeated sentiment was reflected in the following quotes: "I am not aware of the local [LGBT] community" and "[our organization] has never networked with the LGBT community or

agencies." Most administrators had not built relationships with the LGBT community, and although some were aware of LGBT Pride events, only one urban site and one suburban site had a presence at annual Pride events in their respective areas. Most administrators and staff took the perspective that LGBT identity did not matter in terms of service provision, and this notion is contrary to the opinion of many LGBT clients (Douglas & Hines, 2011; Hardesty et al., 2009). Administrative leadership that includes but is not limited to engagement with the LGBT community would communicate the importance of LGBT identity to the direct service providers and build staff awareness of victimization among LGBT populations and the specialized services that are indicated.

Context of systemic homophobia

Some victim assistance respondents worried that LGBT clients, if known, would be mistreated within the systems within which they interfaced, and this fear is in line with that found among LGBT clients in the literature (Hardesty, et al., 2011; Hines & Douglas, 2011). This might explain workers' reluctance to ask about sexual orientation or gender identity. A common motivation expressed by the respondents was a desire to protect the LGBT victim from perceived hostility from police, judges, and attorneys. As a result, workers advised them to conceal aspects of their sexual orientation or gender identity and its expressions. As one respondent from an urban site stated, "If the forms don't ask for it, I don't ask for it. It's the victim's private business, and I don't want my notes to come back to haunt them." Unfortunately, respondents communicated these ostensibly good intentions in ways that might seem homophobic, biphobic, or transphobic. For instance, many respondents would help known LGBT victims by preparing them for what might be a hostile experience with law enforcement or during legal proceedings:

When I have a gay client who is really flamboyant, or a transgender person, all I can do is tell them to tone it down when they are talking to the lawyers, judges, and cops. Act and dress like a man if that's what you are. Go by your real name. I've seen [LGBT victims] being treated terribly once they leave this department. (rural agency respondent)

Here, the service provider encouraged the LGBT victim to conceal their sexual orientation or gender identity in order to protect themselves, yet is seemingly unaware of the potentially deleterious impact that this suggestion might have on the LGBT victim (Todahl et al., 2009). This also shows the complexities of providing direct services to victims while managing relationships with surrounding institutional structures.

Some respondents became advocates for individual LGBT clients by directly addressing court officials. For example,

Before my [LGBT] client goes to court, I find out who the judge will be, the prosecutors, whoever. Some are nicer and less judgmental than others. I will personally talk to them and say, "Listen,

this client is a man but prefers to dress as a woman and be called by a female name. Could you respect that?" Or, "This was an anti-gay hate crime. My client is gay; please treat him with respect." (suburban agency respondent)

The respondents' perception that the police and legal system were heterosexist, homophobic, and transphobic led many service providers to believe they had to adjust their treatment of the victim according to the law enforcement culture. For such reasons, many respondents believed that this study and the related training component needed to target judges, lawyers, and police.

Agency Homophobia

The same discrimination that the respondents described among judges and lawyers also existed within their own victim assistance agencies. One administrator at an urban site stated that several of the staff at her agency held conservative Christian beliefs that were discriminatory toward LGBT persons:

We are at a crossroads at this agency now. We just had a large staff turnover; lots of people retired. So, what we are left with now are the two extremes. [We have] staff who have been here for 20 years or more who are very conservative in their thinking. They are good people and accept Jesus Christ as their personal savior, and have Christian values. They might not see the need for this training. It's a very "love the sinner hate the sin" mentality. But then, the new staff we hired are young, just out of college, more open-minded, and have very different beliefs about LGBT. And I overhear sometimes a clash in opinions between the old and the new. I just tell everyone to treat the clients with respect and keep your judgments to yourself.

The clash in this agency that this administrator spoke of is evidenced in the varying responses of two of its staff members:

My personal feelings about someone's lifestyle never [interferes with] my professional duty to provide and refer services to individuals who have been victimized, regardless of their gender, race, sexual orientation, or religious affiliation ... the agency providing direct services is culturally competent and sensitive to this population.

Another staff member at the same agency stated, "I'm no judge; only God is the ultimate judge. So, my faith in Him supersedes my feelings in the flesh."

Recognized need for training

To be fair, most of the respondents stated that they had never received formal training or education specifically on LGBT communities or victims, which could explain why service providers did not know how or believe it was appropriate to ask respondents about their sexual orientation or gender identity. Further, most respondents stated that they would have attended a training on LGBT victimization if

one was offered, suggesting an attitude of willingness to receive more information about how to enhance their competence in assisting LGBT victims.

Positive case example

One example of an administration that had successfully begun to improve service provision to LGBT crime victims was found in this sample. From the perspective of trustworthiness, Padgett (2017) discusses the importance of examining a negative case that, on the surface, seems to conflict with the emerging findings. In this study, an agency that appeared to be an exception compared to the others served this purpose. At this rural site, the director arranged for staff to be trained in working with LGBT victims and put together a resource guide for these clients. The staff were inspired by the importance that the agency's executive director placed on LGBT training along with his infectious enthusiasm, which demonstrates how leadership style can influence staff receptiveness to organizational change:

[The administrator] is a mover and a shaker—a true visionary. He just sees where the problems are and inspires us to work with him and get trained on the topic. When he says that a training is mandatory, it shows how important it is to him and the agency, so we all get on board.

Once management became aware of the importance of LGBT training and staff competence, how they communicated this to staff impacted staff receptiveness. Respondents at this agency expressed the belief that an administrator who is passionate about the problem of LGBT victimization will greatly affect their willingness to be trained on how best to serve this population.

Discussion

This study advances our understanding of why LGBT victims may experience barriers to culturally competent service provision. A primary purpose of this investigation reflected in the first research question was, how do victim assistance professionals perceive the relationship between a crime victim's sexual orientation or gender identity with the types of services they provide? For the most part, victim assistance professionals did not believe sexual orientation or gender identity was relevant, or at least not relevant enough to ask about it or overcome their concerns that they would make their clients uncomfortable. As a result, agencies did not know who might be LGBT, did not keep records on how many of their clients were sexual or gender minority members, did not maintain specialized referrals for these clients, and did not receive consistent training on these clients and their needs. In terms of the second question, regarding how they perceived their competence to work with these clients, the findings were somewhat unclear. The majority of respondents did not believe the sexual orientation or gender identity of the victim should make a difference in how they treated them, but at the same time recognized their lack of training in these areas and would welcome it if offered.

Critical race theory describes how laws, institutional structures, and individuals who appear not to recognize race and therefore profess to be "race neutral" can contribute to race-based social inequities (Ladson-Billings, 1998). If the belief behind color blindness is, "I don't see color" and/or that it is not important, the belief fueling the idea that LGBT identity is irrelevant could be "I don't see LGBT identity." The idea that "a victim is a victim" may belie an honorable desire to treat all crime victims equally; however, this belief overlooks the importance of LGBT identity and related stressors in the lives of the LGBT victims they serve. The lack of statistics on LGBT clients, documents that fail to ask for the sexual orientation or gender identity of the victims, and failure of agencies to provide LGBT-specific training are examples of how cultural blindness may exist and be maintained at the organizational level. In this study, LGBT clients were invisible because staff and administrators were unaware of their existence and needs.

Further, cultural blindness could also be seen as a microaggression, defined as an unintended and unconscious demeaning message from a member of the dominant group toward someone from a nondominant group (Smith et al., 2012). Microinvalidations are a subgroup of microaggressions "that exclude, negate, or nullify the psychological thoughts, feelings, or experiential reality of a person of color" (Sue et al., 2007, p. 274). The repeated assertion among these respondents that the sexual orientation or gender identity of a victim does not matter in terms of the experience of victimization or how services should be delivered could be seen as a microinvalidation.

LGBT psychotherapy patients have identified how they experienced sexual orientation-related microaggressions from their therapists, including therapists' avoidance or minimization of their sexual orientation (Shelton & Delgado-Romero, 2011). The study described in this paper further explicates the Shelton and Delgado-Romero findings by illuminating how and why service providers might act in these ways. The recurrent stated belief that sexual orientation "does not matter" to the experiences of victimization or how services are rendered, as well as the wish to avoid offending the client, provides some insight into these service-provider behaviors. Future studies on service provision to LGBT victims could further expand on the findings herein, as well as the themes identified by Shelton and Delgado-Romero.

Crime victims seek formal assistance to ensure personal safety, as guidance towards resources that can help them cope emotionally, physically, financially, and pursue justice (NOVA, 1995). Yet, the needs of LGBT victims differ from their non-LGBT counterparts due to internalized societal oppression. Further, the needs of clients who fall under the category of transgender will vary from those who are gay, lesbian, or bisexual. For example, transgender clients state that they need their service providers to use gender-neutral language (Bjorkman & Malterud, 2007; Boehmer & Case, 2004; Helfrich & Simpson, 2006) and their preferred names and pronouns (Gentlewarrior, 2009; Lunine, 2013). LGBT persons, in general, need providers to understand the extent to which they have come out, and the

amount of cultural and internalized homophobia or transphobia that they experience (Duke & Davidson, 2009; Farley, 1992). Reliance on the victim to disclose LGBT identity found in this study is an example of cultural blindness, as most of the sample were seemingly unaware of how to ask for the sexual orientation or gender identity of their clients or the importance of doing so. Such potentially microinvalidating practices and policies create obstacles to receiving appropriate assistance.

The field of queer criminology underscores and examines the stigmatization and rejection experienced by queer people in criminal justice systems (Buist, Lenning, & Ball, 2018). Queer theory addresses how norms around sexuality and gender are established by those in positions of power to maintain their power by subjugating and shaming those who transgress these norms (Buist & Lemming, 2016). When a victim assistance professional, or anyone in the criminal justice profession practices cultural blindness, they fail to acknowledge or even identify the importance of understanding the needs of LGBT victims. As a result, LGBT crime victims are rendered invisible, and this invisibility denies them full access to justice and protection, thus preserving the reciprocal relationship between oppressive cultural norms and hierarchies of power. By focusing on service providers, these findings are congruent with the call from queer criminologists to broaden our attention beyond LGBT victims to include the systems that oppress them (DeKeseredy & Dragiewicz, 2018).

Practice implications

Comprehensive and mandatory training

A major implication of this study is the need to develop educational programs specific to LGBT victimization and cultural competence. Undertrained staff will likely remain unaware of the current knowledge about the lived experiences of LGBT people, such as the impact of coming out, heterosexual and cisgender privilege, and lifetime experiences with stigma or shame. One important component of this type of training would be to impart the importance of knowing a victims' sexual orientation or gender identity and learning methods to invite clients to share this information. Service providers who are well informed about practice with LGBT clients will experience greater rapport with the LGBT victim, will understand the victim holistically, and in turn, provide relevant services (Messinger, 2020). There is good reason to believe that such training should be done even before criminal justice professionals enter the workforce, while they are still undergraduate criminal justice majors (Fradella et al., 2009).

It is important to mention that not all LGBT persons decide to come out, and many remain closeted for various reasons, including fear of stigma or the desire for privacy (Messinger, 2020; Rasmussen, 2004). For sure, this complicates the issue of asking clients about their sexual orientation or gender expression. In fact, some respondents did not ask victims for their sexual orientation or gender identity because they questioned whether doing so was appropriate. Though this intention is well-

meaning, not addressing a victim's LGBT identity may inadvertently perpetuate a culture of LGBT blindness and, in turn, invisibility. If providers do not ask for this information, they place further responsibility on the victim to disclose. While many respondents questioned the appropriateness of requesting this information, it is notable that service providers are already asking for intensely private and personal information such as the victim's income, living arrangements, available supports, and the nature and details of their victimization. However, appropriate training could build on workers' positive intentions and teach them to know when to ask, how to ask, and when to back off and respect the clients' wishes. Additionally, both the service provider and the organization can foster an atmosphere of LGBT acceptance and affirmation to enhance the victim's feelings of safety, thus enabling them to disclose and get the appropriate services suited to their specific needs.

Referrals

Many respondents had not previously considered if the resources provided to LGBT victims would be affirming or even appropriate in light of their clients' sexual orientation or gender identity. The lack of familiarity with LGBT affirming resources related to the overall lack of knowledge of the local LGBT community among service providers. It also reflects a need for victim assistance agencies to build relationships with LGBT-specific organizations. Acquiring knowledge, awareness, and being professionally connected to the LGBT community and LGBT-specific resources can help the service provider identify LGBT-specific resources that best cater to their clients' needs.

Relationships with other providers

Many respondents in this study had a desire to protect LGBT victims from hostility they may encounter from the larger criminal justice and police system. It is likely that LGBT victims also experienced this hostility, leading them to feel unsafe and, therefore, unable to disclose their sexual orientation or gender identity, particularly if the police were their initial point of contact in the victim assistance service delivery system. Police training on LGBT issues and their inclusion on the police workforce, have been found to be effective in mitigating discriminatory missteps with this population (Buist & Lemming, 2016; Guadalupe-Diaz, 2019). Thus, in addition to providing training, an idea for future studies would be to gather together members of law enforcement and victim assistance organizations to discuss perceived barriers, their knowledge gaps, and suggestions for ways to improve their understandings and practices with LGBT victims.

Relationships with the LGBT community

Like the director in that positive case, administrators need to lead efforts to engage their local LGBT communities, thereby communicating its importance to staff. They need to ensure that their employees participate in training related to how best to access, network, and build relationships with the LGBT community and foster a sense of social justice and respect for this type of diversity. In rural areas with few, if any, services for LGBT people, directors and employees may need to engage online

resources. Administrators are also strongly advised to include sexual orientation and gender identity on agency forms that the victim completes or that the staff person uses as a guide. Administrators can also lead the way by including materials in waiting rooms that communicate that the agency is LGBT friendly, such as posters, LGBT magazines, rainbow signs and stickers, and specifically mentioning that the agency serves LGBT victims on its website and outreach materials.

Limitations

There are several limitations to this study. First, as this was a study of a relatively small sample, the results are not generalizable to the entire population of victim assistance service providers and administrators. There existed a potential selection bias whereby only administrators who already had an interest in furthering their agency's cultural competence with LGBT victims signed up to have their agencies participate in the training program. These administrators may have observed that their staff had specifically lacked skills to work with LGBT victims and therefore needed this training. Thus, these staff might be more deficient in this area than that of agencies in the general population whose administrators did not seek training. However, it is also possible that administrators and staff who did not seek training will not have recognized homophobia and transphobia among their staff, possibly indicating that the agencies who needed the training most did not seek it, and their staff did not get it. Directors of agencies chosen for this project mandated the respondents' participation in this training, and thus, the baseline data collection upon which these findings were based. During the focus groups, some staff expressed irritation at having to spend a day away from their regular duties, which may have played a role in their responses.

Nevertheless, the results can be used as a guide for future research. The themes and subthemes (i.e., irrelevance, fear of intrusion, and agency homophobia) suggest potential variables for future quantitative research with larger samples. For instance, research questionnaires could be developed that ask specifically about LGBT training received, organizational involvement with the LGBT community, and knowledge of LGBT resources. This study provides an important first step towards understanding the perceptions of staff and administrators towards LGBT victims, and the barriers that prevent them from competently serving them.

Another limitation is that this study focused on staff and administrator perceptions solely towards LGBT-identified victims of crime. Perceptions about sexual and gender minority populations that do not identify as LGBT were not captured, including people who identify exclusively as queer, men who have sex with men, women who have sex with women, genderqueer and non-binary persons, or those with asexual or pansexual identities who do not necessarily identify as lesbian, gay, bisexual, or transgender. Queer criminologists warn that LGBT labels may be antiquated, overly restrictive, and thus fail to capture the spectra of people who engage in various sexual behaviors and gender expressions (Buist, & Lemming, 2016; Buist, Lenning, & Ball, 2018). However, this study's methods and

findings can serve as an important foundation for building future studies that can include service providers to victims with such identities, behaviors, or expressions.

Finally, crime victims served by these respondents were not included in the research. Future studies could involve interviews with staff and LGBT victims from the same agency to capture the levels of agency and staff cultural competence from both perspectives. Researchers could carry out focus groups that bring together staff and victims for a conversation on the specific needs of the victims and how well those needs are met.

Service provision to LGBT crime victims is an understudied area. This study is among the first to examine how and why staff and organizations may not be providing adequate services to LGBT victims. This knowledge can be used to help develop cultural competence training by informing victim assistance training and education curricula and can assist multiple professions in their pursuit of service provision to LGBT victims. Capturing the perceptions of this group of administrators and staff are an important step towards bridging a gap between the needs of LGBT clients and the services and treatment they need to recover and flourish in the wake of their victimization.

Appendices

Appendix A. Demographics of participants

Appendix B. Victim assistance sites

- Northeast Urban: This site serves one city and is affiliated with the District Attorney's office.
 - Northeast Suburban: Serves one county and is affiliated with the County Prosecutor's Office. Victims access this agency's services once a police report has been filed and the case will be prepared for trial.
 - Mid-Atlantic Suburban: This agency is part of the State Attorney Office. Victims access this agency's services once a police report is filed.
 - Southeast Suburban: This nonprofit agency serves a small city and three neighboring counties. Victims access this agency's services either directly through a 24-hour hotline, or through referrals made by the police, hospital, or local university.
 - Midwest Rural: Serves one rural county and is affiliated with the county Prosecutor's Office.
 - Midwest Suburban: Serves one small city and the surrounding suburban counties. Affiliated with the county Department of Corrections.
 - Western Suburban: Serves one suburban county on the west coast, and is affiliated with the county District Attorney's office.
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Appendix C. Focus group guide

1. Tell us about the LGBT community here in your area?
2. Has your agency served any LGBQ clients that you know of?
3. Does the agency provide services to transgender clients?
4. If you were a LGBT client, how would you feel about the services at this organization? Walk us through it.
5. What would the people in your community say about your services to the LGBT community?
6. How well do you think your agency is serving the LGBT community?
7. What have you done within your organization to be more welcoming to the LGBT community?
8. How are the needs of LGBT clients' different from the needs of other clients?
9. What support is required to better serve LGBT clients?
10. How does the agency help staff better serve LGBT clients?
11. a. What training is **staff** required to receive that is specific to the LGBT population?
b. What training is **administrators** required to receive that is specific to the LGBT population?
12. Is there any openly LGBT staff currently at your organization?
13. What is it like for LGBT staff to work at this organization?

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