



Family abuse targeting queer family members: An argument to address problems of visibility in local services and civic life

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Abstract

Purpose To draw attention to the invisibility of family abuse victimisation of lesbian, gay, bisexual and/or trans folk and its impacts; and the lack of appropriate, confident, skilled, formal responses to family abuse victimisation. In addition to argue that local strategic commitment is required to address structural discrimination faced by queer folk and to positively invite those victimised to seek help from local services.

Method A multi-method local study in a Central Bedfordshire, a County in England was conducted with an online survey, interviews and focus groups with local LGBT+ communities and practitioners.

Results The data suggests worryingly high reporting of family abuse particularly for trans participants. At the same time our data, in line with others, shows help-seeking to be low other than to informal sources of help especially friends. In addition professionals appear underconfident about how to respond appropriately.

Conclusions Family abuse targeting queer folk is a significant problem and under-recognised. This is in part due to the mainstream domestic abuse sector associating family abuse with racially minoritised and/or faith communities and particular forms of violence such as “honour” abuse, forced marriage and female genital mutilation. Family abuse victimising queer folk is relatively invisible despite profound social, mental and physical health impacts. Practitioners in this study describe a lack of confidence, skills and knowledge about their practice responses to queer folk which needs to be addressed through training. However, we also conclude that the wider civic context can also play a part in sending messages to local queer folk that local services are for them and that there is a role for civic leaders to improve the visibility and confidence of local queer folk as citizens.

Keywords LGBT+ · Queer · Family abuse · Help-seeking · Civic responses

Introduction

The public story of domestic abuse (DA) (Donovan and Hester, 2014) constructs this significant social problem as one of cis, heterosexual men, using predominantly physical violence,

to exert power and control over cis, heterosexual women in intimate relationships. This public story of DA reinforces an understanding of abusive men as strong and big and of the women they victimise as weak and small. This story is problematic for a number of reasons. Its pervasive prevalence makes it difficult to recognise and name domestic abuse in the relationships of lesbian, gay, bisexual women and men and/or trans and non-binary folk, to recognise that men can be victimised and women can be perpetrators and that domestic abuse is not only or always characterised with physical violence. However, most importantly in the context of this article it also frames domestic abuse as a problem of adult intimacy. In England, the statutory definition of domestic abuse includes family abuse where the victimised family members are aged over 16 years. Yet the public story of DA foregrounds adult intimacy as being the risk for DA and family abuse of those over the age of 16 years is rendered invisible.

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Furthermore, the dominant understanding of what family abuse might be is narrowly constructed as pertaining to the “honour”-determined abusive behaviours of racially minoritised communities, underpinned by faith and/or tradition, and including “honour” based abuse and/or forced marriage and/or genital mutilation (e.g. Gill & Brah, 2014). Again, the dominant construction of family abuse is underpinned by a cis heteronormative imperative wherein, predominantly, girls and women are coercively expected to conform to gender roles and the marriage plans of their parents/elders. In this article we demonstrate that the dominance of this understanding of family abuse has two core impacts. First is that it acts as a barrier to queer folk, from any community, seeking and securing the support they need for their family abuse victimisation. Second is that practitioners working in statutory and third sector organisations that provide a service for domestic abuse do not feel confident, skilled and knowledgeable enough to respond appropriately to queer folk victimised by family abuse.

Before proceeding with the discussion, a note about terminology is required. In this article we adopt the term queer to refer to lesbian, gay, bisexual and/or trans, and non-binary+ people. It is important to recognise that trans people might identify as heterosexual and that they suffer particular discrimination pertaining to their trans gender identity that is distinct from the discrimination experienced on grounds of sexuality. When we refer to communities or specialist organisations we use the acronym LGBT+. When referring to the work of others we adopt their terminology.

Drawing on a community study (Donovan et al., 2021) conducted in Central Bedfordshire, a County in England, with the local LGBT+ community and practitioners who have a domestic abuse remit, we argue that there are consequences for domestic abuse being operationalised as intimate partner abuse and family abuse being operationalised as affecting only racially minoritised and/or faith communities: there is very little understanding about the family abuse of queer folk and, worse, few services to respond appropriately to their victimisation. There are commonalities between the family abuse perpetrated against queer folk and that perpetrated in “honour” abuse. These are the attempts to coercively control the gender and sexuality identities, practices and presentations of family members and to punish them for non-conformity. However, our analysis goes further exploring some of the reasons why local services might struggle to support queer folk who are victimised by family abuse. Reasons include the relative invisibility of LGBT+ communities in strategic policy, in local political rhetoric, in local consultations about service delivery; and in a lack of recognition of queer residents as local citizens. We discuss the importance of upskilling practitioners with a remit for domestic abuse to respond better to family abuse. However we also point to the need for that work, which includes training, best practice operation and strategic

policy development, to be supported by a local government approach that recognises and values its queer citizens.

To unpack this discussion the article is divided into five sections. In the first, we consider in more detail the statutory definition of domestic abuse in England and the ways in which family abuse has been constructed as a concern of particular racially minoritised and/or faith communities. This will include a consideration of the research on “honour”-based abuse and analysis of how such behaviours concentrate on families’ and communities’ concerns about the reproduction of particular norms of gender and sexuality. In this section we also consider the work of Michaela Rogers and her application of honour-based violence to the family abuse of trans people to develop the argument that family abuse can be targeted at any family members (siblings, parents, cousins, aunts) whose presentation of gender and/or sexuality is believed to threaten a family’s perceived status, value and/or standing in their neighbourhood and/or community, including faith community. In the second section we discuss the methodology of a mixed methods community study carried out in Central Bedfordshire, a County in England, which explored experiences of and responses to domestic abuse including family abuse in the local LGBT+ community. In the third section, we consider the key findings from this survey that indicate family abuse is a substantial problem for queer folk, and that it is not only a problem of racially minoritised communities. We also provide an analysis of responses that point to three broader themes: the invisibility of queer lives in Central Bedfordshire; a lack of understanding and acceptance of them from local civic and political leaders, and from practitioners; and the impacts on queer folk of their invisibility and non-acceptance. In conclusion we emphasise two areas for further work. First is the need for a discussion in the domestic abuse field about family abuse and its impacts for communities other than racially minoritised and/or faith communities. Second that awareness needs to be raised about the particular needs of queer folk victimised by family abuse.

Defining domestic abuse: gaps and assumptions

In England, the Domestic Abuse Act (2022) provides a statutory definition of domestic abuse in two parts. The first deals with the relationship contexts in which domestic abuse victimisation might take place and the second provides detail about the range of behaviours that make up domestic abuse. The latter includes physical, emotional, economic, and sexual abuse as well as coercively controlling behaviour which can be experienced as a pattern of behaviours that are intended to threaten, harm, punish, or frighten. Regarding the relationship context, there must be a ‘personal

connection' and those involved must be over the age of 16 years. The response to victimisation of anybody younger would fall to statutory safeguarding processes. A personal connection is conceived broadly enough to be inclusive of family relationships, current and ex-intimate partner relationships, regardless of whether those involved share a home and regardless of gender or sexuality.

Along with defining the parameters of family abuse in relation to a description of relationships that might be implicated, it is also important to take account of the ways in which those family relationships are shaped by economic and social policies. Feminist scholars have pointed to the way women's structural economic dependency on men has been the result of economic and welfare policies that have positioned married women as financial and material dependents of men (Walby and Towers, 2018). Unequal pay and a gender segregated workforce, even after the more recent progress there has been made in legislating for women's equality, still mean that it is increasingly difficult for women to live financially autonomously and they, more so than men, are reliant on a two-income household to meet the costs of living because of the gender pay gap (Jewell et al., 2020). The impacts of their dependency on men for securing housing and running a household are crucial factors in understanding the decisions women victimised by men in domestically abusive relationships can make about whether and when to leave – especially if they have children (Eriksson and Ulmestig, 2021; Sharp-Jeffs, 2021).

Similarly, there have been several pieces of legislation and economic policy in recent years that have increased the structural dependency of children on their parents and extended their need to live in the parental home into young adulthood (Stone et al., 2011). A combination of welfare regulations that prevent young people from being eligible for housing benefits and an age-structured statutory minimum wage, alongside prohibitive mortgage and rent prices, a predominance of zero-hour contracts in the sectors of employment most likely to be favoured by young adults (leisure, hospitality, retail), and the significant debt young people are left with who have had a higher education, have meant that it has become harder for young adults to live independently. Using the same conceptual approach as with women, it is likely that such extended dependence of adult children on their parents might create the conditions within which family abuse can take place. Families providing material and financial support might expect to be able to impose rules and norms of gender and sexuality as a condition of their support.

In England, the largest specialist LGBT+ organisation providing support for violence and abuse, Galop, has always included family abuse in their definition and delivery of domestic abuse services for those who are victimised. Their work provides evidence that family abuse has always been

a significant proportion of their work. A report on their services in 2018 indicates that 23% of their clients reported family abuse (Magić and Kelley, 2019). In their survey of young queer people, Metro Youth Chances (2016) found 29% of respondents reported family abuse, with 36% of these stating that their gender identity or sexuality was at least a partial reason for this victimisation. In their study, Donovan et al., (2014) found 42% of participants reported experiencing homo/bi/transphobia from family members; and the age group 16-19 years was significantly correlated with reporting homo/bi/transphobia from family members.

In England, as elsewhere, the Covid-19 pandemic has exacerbated the degree to which young adults have been thrown back onto their families of origin for support since 2020. Universities sent students home and delivered remotely, large sectors of the labour market were closed and employees furloughed, including those sectors in which young adults are more likely to be employed such as the hospitality and retail sectors (Gustafsson, 2020). Young adults, including queer folk (LGBT Foundation, 2020), unable to continue in their rented accommodation for whatever reason were thrown back onto their families of origin for material and financial support. It is in this context that Galop recently commissioned a national survey of young LGBT+ people ($n=5078$) about family abuse victimisation (Galop, 2022). This found 29% reporting family abuse overall, with 43% of the trans and non-binary respondents doing so. The majority of those reporting family abuse (60%) stated that their sexuality and/or gender identity was the main or partial reason for the family abuse they reported. For the age group 26-30 years, 72% of those who reported family abuse felt their sexuality and/or gender identity was the main or partial reason.

Elsewhere, family abuse is found at similar levels amongst LGBT+ communities. In Australia, a community survey of LGBTQ people ($n=6835$) found a discrepancy between the proportion of those responding to a question asking whether they had been victimised by family abuse (30.93%) and those providing answers to a series of questions about particular types of abuse from their family of origin (43.18%) (Bourne et al., 2023). The authors suggest that the discrepancy is due to a lack of recognition of family abuse amongst LGBTQ folk. Research into homelessness of queer folk provides other evidence of family abuse. In several countries they are disproportionately homeless (Dempsey et al., 2020), and one of the most often reported factors leading to homelessness is family abuse, or conflict as it is often termed, as a response to the identities of sexuality and/or gender of the homeless family member (e.g. Castellanos, 2016; Galop, 2022). The impacts of family abuse notwithstanding, impacts of homelessness can be discerned from studies exploring the increased risk for poor mental health and suicide ideation amongst queer folk. These point to the importance of supportive families (Ryan

et al., 2010; McConnell et al., 2016; Skerrett et al., 2016) for the long-term general health, mental health and wellbeing of queer children and family members.

Family abuse has most often been discussed in the context of racially minoritised and/or faith communities, particularly, but not exclusively, those originally from South Asia (Gill & Brah, 2014) where it is most often referred to in specific ways: “honour”-based violence, “honour” killings and forced marriage (Meetoo & Mirza, 2007). This is regardless of the lack of evidence that “honour”-based violence is associated with any particular culture or faith (Gill & Brah 2014; Idriss & Abbas, 2011; Meetoo & Mirza, 2007). “Honour”-based family abuse has been explained as targeting predominantly women and girls who are understood to represent the “honour”, the status, the value of a family within their (often, faith) community. Those women and girls perceived to have brought shame to the family elicit punishment and coercion to conform to the family’s norms of: gender presentation, i.e. looking appropriately gendered; gender practices, i.e. behaving appropriately with respect to cis, heterosexual intimacy and marriage, including being obedient to families’ decisions about marriage and choice of spouse; and gendered identities, i.e. conforming appropriately to the family’s norms of cis, heterosexual gender identities. The needs, desires, and interests of the individual family member are perceived in these communities as subordinate to the needs, desires and interests of the collective family (Lowe et al., 2021). Thus societies associated with “honour”-based abuse are set against the more individualistic societies in the West such as England (Lowe et al., 2021) where it is believed that the individual is at the centre of their own life with the right to prioritise their own interests, desires and needs.

Our approach is to trouble such a binaried vision of “honour”-based abuse. It fixes a homogeneity upon South Asian communities that is not accurate and which perpetuates the legacy of colonialism that others and devalues the cultural, social and political practices of colonised countries and peoples in contrast to the peoples and country of the coloniser. However, the reductionism of assuming that only racially minoritised communities value family honour, status and value, is also detrimental to understanding how family abuse might operate in dominant white families and communities. Whilst research has been conducted that explores “honour”-based violence aimed at LGBT people (e.g. Khan et al., 2017, 2018; Lowe et al., 2021) there has been very little focus on family abuse amongst majority white communities.

The exception to this gap in the literature has been the work of Michaela Rogers who discusses the use of “honour” when explaining the victimisation of trans people not only by family members but also intimate partners. In her discussion Rogers (2017: 226) argues that it is the broader context of cis heteronormative gender binaries that produce

the conditions within which trans people can be victimised by family members for non-conformity to the gender norms produced by those binaries:

trans people’s interfamilial experiences of DVA constitute a distinct form of abuse which is underpinned by an ideology about gender as binary and fixed. This ideology also perpetuates heteronormative ideas about gender roles, norms and practice within a ‘family frame’.

Rogers goes on to discuss the parallels in how notions of shame and “honour” are conjured to explain the abuse of families to their members in racially minoritised communities and the violence of families towards trans family members regardless of their community of origin. Her work shows how “honour”-based abuse is rationalised (sometimes with reference to a faith) as necessary in order to restore and/or maintain “honour”. Perpetrators of “honour”-based abuse, rather than being censured for their abuse, are respected for defending the family’s honour. Similarly, Rogers argues, family members who abuse trans relatives believe themselves to be protecting their own “honour” and addressing the stigma they feel that the family is exposed to because of their gender non-conforming relative. For example, Rogers (2017, p.232) argues: “some family practices served to repress trans identity, or to minimise stigma, helping to maintain or repair the family’s normative status within the context of their community”.

In other studies there is evidence of forced marriage, for example of gay men, by families who are unable to countenance the non-heteronormative sexuality of their male family member. This points to the fact that, whilst women and girls are most often victimised by family abuse, men and boys are too if and when their sexuality and/or gender identity is perceived to be non-conforming and a threat to the family’s norms of gender and sexuality (e.g. Chantler et al., 2009). Again these norms coalesce around gender presentation in dress, for example, how a body is inhabited and used; in perceived inappropriate gender practices with perceived ‘outsiders’; and in any evidence of ‘difference’ to cis heteronormative identities, for example, having inappropriate literature, internet activity, social media use. Any one of these might be sufficient to trigger family abuse that might be recognised as “honour”-based abuse if the person being victimised is from a racially minoritised and/or particular faith community, but will not necessarily be recognised if the family and victimised family member is white and the victimised family member is queer.

In recent years conversion therapy has emerged as a form of family abuse associated with queer folk. In the UK Government’s survey of LGBT people (with a sample of 108,100 respondents this is the largest survey of its kind) they found 2% of respondents had undergone conversion therapy and

5% had been offered this, with trans respondents much more likely to have both undergone and been offered conversion therapy (Government Equalities Office, 2018). Respondents from faith communities were also more likely to have gone through or been offered this, however, conversion therapy was not confined to faith communities. After a consultation on conversion therapy, a report (Command Paper, 2021) presented to the Government stated that conversion therapy would be banned. Notwithstanding subsequently proposing to exclude conversion therapy aimed at trans people and a back-track from that position to reinstate trans conversion therapy in the ban, the legislation is yet to materialise. Campaigners have argued that conversion therapy is abuse, however, there has not been a domestic abuse sector response to conversion therapy as a form of DA where the family member victimised is over 16 years of age. This points to a further failure of the DA sector to properly recognise queer folk as targets for family abuse victimisation and provides a reason why victimised queer folk do not report to DA organisations.

It is a common feature of research exploring the help-seeking of queer folk who have been victimised by family abuse or intimate partner abuse that they rarely approach domestic abuse services or any organisations with a remit for responding to domestic abuse, for example, the police, or specialist victim support services. Instead, they turn to friends as their first source of support and counsellors and therapists if they approach a formal source of support (Magić and Kelley, 2019; Galop, 2022; Donovan and Hester, 2011, 2014). Conversely there is evidence that were victimised queer folk to approach a domestic abuse service or other formal source of support such as the police, they would not be guaranteed an appropriate, sympathetic or respectful response. This is due to a range of factors stemming from the public story of DA that presents this as a problem of intimate partner abuse (Donovan and Hester, 2014). This public story of DA means that other stories of domestic abuse are harder to tell and hear. Practitioners who expect and recognise the public story of DA can be less informed, competent and confident to appropriately support queer folk, have a lack of awareness that domestic / family abuse affects LGBT+ communities, and often are not perceived as being welcoming and inclusive and inviting of LGBT+ service users (Harvey et al., 2014; Magić and Kelley, 2019; Donovan and Barnes, 2020). Others have pointed to the reluctance of those victimised by family abuse to approach the police for fear of exacerbating the situation, retribution, criminalising their family and/or irretrievably losing their family and/or home (Idriss, 2022).

Rather than this being an individual problem of not knowing where to turn to, we argue that this is a societal problem that is the result of the invisibility of both family abuse beyond female genital mutilation and “honour”- based abuse and the particular ways that LGBT+ communities are

affected by family abuse. To address this requires a transformation from stigmatised individuals into empowered citizens who have the confidence and trust that when they seek help for domestic abuse, they will be taken seriously and their needs adequately met. As McGhee argues, “active citizens have to be made”, which is of particular relevance when these potential active citizens are to be made from “detached and designated high-risk and hard to reach sub-populations” (McGhee, 2003, p. 362). Local government can and should develop approaches that explicitly recognise members of local LGBT+ communities as local citizens, garner their views on the provision of local services, invite them to become employees in local services, and encourage them to come forward to access various support services and voice their experiences of victimisation.

Methodology

This research was commissioned by Central Bedfordshire County Council in order to address questions about local prevalence levels of intimate partner and family abuse amongst local LGBT+ communities, whether local services are fit for purpose for local queer folk; and how to improve local awareness about domestic abuse and help-seeking in LGBT+ communities.

A multi-method approach was adopted which included: an online survey for LGBT+ residents aged 16 and over; an online survey for professionals working with LGBT+ people and/or those who experience domestic abuse in the area; semi-structured interviews and a focus group with relevant professionals; semi-structured interviews with LGBT+ residents, together with input from LGBT+ members of a youth group and the LGBTQ+ society at a sixth form college in the locality. The research received ethical approval from Durham University.

The survey aimed at queer local residents was designed based on the COHSAR methodology (Donovan and Hester, 2014) and promoted as looking at ‘LGBT+ relationships’, so that those who did not define their experiences as domestic abuse would not be put off from responding. The survey was open for 3 months between June and September 2020. This was a period where lockdowns related to the covid pandemic were either national or localised dependent on local infection rates. Most services and education institutions were delivering online and we extended the survey in order to encourage take-up. A convenience sampling strategy was used, as available data regarding the size of the UK or regional LGBT+ populations are not considered robust enough to allow for representative sampling (Donovan and Hester, 2014). Caution should therefore be taken about generalising more broadly about the wider LGBT+ population based on the findings presented

here. In total 179 responses were received, of which 120 were included in the final sample. Responses removed included individuals who did not: identify as LGBT+; live in Central Bedfordshire; progress past the first page of the survey which contained only demographic questions; meet the age criteria of 16 years and above. Given the context in which the research was conducted this total is impressive.

Once the survey closed, two of 10 participants who consented to be sent information about the next stage of the project took part in interviews. Qualitative data from the LGBT+ community was supplemented by input from a local youth group who provided written responses to questions about help-seeking for intimate partner and family abuse, and the LGBTQ+ society at a Central Bedfordshire College, some members of whom took part in a focus group.

The online survey for professionals working in a County in England was circulated through professional networks, and was open for 7 weeks between September and October 2020. Thirty-five completed responses were included in the final sample. Respondents to the survey came from a range of sectors, including domestic abuse, police, adult and children's social care, health and housing. Engagement with this survey remained low and our use of the data is circumspect and limited to indicative areas of concern that require further investigation.

Qualitative interviews ($n=8$) and a focus group ($n=9$) were conducted with professionals working in the area. Two interviewees also attended the focus group, giving a total of 15 individual participants. Despite various attempts there was low engagement from key organisations such as the police, housing and social care professionals, for either the quantitative or qualitative activities. The low engagement rate might have been partially a consequence of when the research was conducted, during local and national lockdowns. However, we also argue that the low response rate reflects a lack of knowledge about and/or perceived relevance of the particular experiences of local queer residents and this is discussed below in relation to the findings. All qualitative data is anonymised to protect identities of participants.

Once data collection was complete, quantitative data from the survey was cleaned, coded and then analysed using IBM SPSS v22. Chi-squared tests were performed to test for statistically significant findings. This data was reviewed and key patterns were identified. The recordings of interviews and focus group were transcribed and analysed thematically to identify key themes. In what follows, after a brief description of survey findings about the prevalence of family abuse and help-seeking, we focus on qualitative data pertaining to help-seeking and accessibility of local services, and the broader context of Central Bedfordshire as a place in which to reside as a queer person.

Findings

Survey respondents were presented with twenty options of abusive behaviours they may have experienced in their lifetime from an adult family member. Throughout the discussion of findings, where n numbers are reported this relates to the number of responses received for that question, as this varied across the survey. Almost two thirds (65%, $n=105$) of those who answered this question report they have experienced at least one form of abuse, and just over two fifths (41%) have experienced four or more. The most common behaviours reported are those categorised as emotional and controlling behaviours, experienced by 63% ($n=105$) of respondents, as shown in Table 1 below.

The second most common experiences are of LGBT+ identity abuse, specifically linked to a person's sexuality and/or gender identity. These include having their identity disregarded or used against them, being outed or threatened with outing, being kicked or forced out of the family home due to identity or being pressured/forced into a heterosexual relationship. Almost half (48%, $n=105$) of the sample reported one or more of these abuse types, though trans and disabled respondents were statistically most likely to report any family abuse. Whilst respondents from racially minoritised backgrounds (20%, $n=20$) are more likely to report family abuse than white respondents (15%, $n=47$) this was not statistically significant. This might be the result of the small numbers of respondents from racially minoritised groups responding to the survey so further research on this is warranted.

A small number of respondents elaborated on these "honour"-related experiences in an open-ended question. Most responses describe being prevented from openly expressing their gender or sexuality at home or in the presence of family members. Examples given focus on presentation, including restrictions being placed on their clothing and behaviour, practices, including not being allowed to bring partners to the family home or events, and identity, including in two cases being coerced or forced into a heterosexual marriage. Other ways that identities were disregarded included, for example, "always telling me I just need to meet a nice boy and I'll see I'm straight" (bi+racially minoritised woman, age 16-17). These findings confirm the research conducted by others in Britain and Australia, that family is abuse is a considerable problem for queer people and that it is most often characterised by a focus on the identity of gender and/or sexuality of the person victimised.

As shown in Table 2 below, it is most common for respondents to have reached out to informal support networks like friends (62%, $n=66$) and digital or online communities (30%, $n=66$). Around a third (36%, $n=66$)

Table 1 Experiences of abuse from a family member (*n*=105)

		Family - Emotional and controlling abuse	Family - Financial abuse	Family – Physical abuse	Family – LGBT+ Iden- tity abuse	Family - Stalk- ing or harass- ment	Family - Sexual abuse	Family - None of the above
Overall	105	63%	32%	15%	48%	11%	3%	34%
Age								
16-17	21	76%	38%	10%	48%	5%	-	24%
18-24	25	60%	32%	28%	52%	8%	-	36%
25-34	20	55%	20%	23%	45%	10%	-	14%
35+	39	62%	36%	18%	41%	15%	8%	28%
Gender								
Women inc. trans women	41	66%	32%	12%	46%	12%	2%	32%
Men inc. trans men	42	52%	32%	10%	38%	7%	2%	45%
Non-Binary	16	82%	33%	38%	75%	22%	6%	13%
Trans Identity								
Cisgender	71	58%	30%	7%	39%	9%	4%	39%
Trans	29	79%	41%	35%	69%	17%	-	17%
Orientation								
Gay	28	43%	18%	-	35%	7%	4%	54%
Lesbian	18	67%	44%	17%	50%	6%	11%	28%
Bisexual/pansexual	36	75%	42%	19%	56%	6.5%	-	36%
Queer	11	64%	9%	9%	45%	-	-	11%
Ethnicity								
White	79	58%	28%	15%	45%	11%	3%	39%
Black and racially minoritised?	26	77%	46%	15%	54%	8%	4%	19%
Disabled								
No	55	51%	20%	7.3%	44%	11%	2%	46%
Yes	50	76%	46%	24%	52%	10%	4%	22%

of respondents have spoken to a professional about their experiences. The most often identified source of support approached are counsellors/therapists. Despite trans respondents reporting more mental health impacts, cis respondents are most likely to have spoken to a counsellor or therapist (22%, *n*=41 compared to 13%, *n*=23) while trans respondents are most likely to have disclosed their experiences to an LGBT+ organisation (22%, (*n*=23) compared to 10% (*n*=41) for cis respondents). Very few respondents (6%, *n*=66) have contacted a domestic abuse helpline in relation to these experiences and none have sought help from a Central Bedfordshire domestic abuse service. Slightly less than 5% of respondents, all of whom are cis women, have spoken to the police about abuse from family members. It is possible that the help-seeking practices of queer respondents reflect the impact on them of the public story of DA. Most of the family abuse victimisation they report is of emotional and coercively controlling abuse rather than physical or sexual abuse which are forefronted in the public story of DA. This might explain why

respondents might not think to report to a domestic abuse service or the police and instead seek help from other, informal and/or individual-focused services.

Turning to the findings from practitioner data analysis. Of the 35 respondents to the survey, most (7) came from domestic abuse organisations and the police (8). The majority of respondents (21) describe themselves as front-line practitioners, while four are at senior management level. Low response rates are difficult to explain other than to speculate about the impacts of Covid lockdowns and that the needs of queer folk are not prioritised or perceived as relevant to their practice. Some practitioners are aware that not enough is being done to turn good intentions into material change. The following excerpt reflects this concern:

I think our organisation has the best intentions, but don't fully recognise that we are under prepared to support anyone other than cis-het women. I would like to see LGBT+ added to the agenda for all strategy/policy reviews going forward, along with all other protected characteristics, to ensure EDI [Equal-

Table 2 Help-seeking for Family Abuse: Who is turned to? (n=66) Insert here

Help-Seeking for Family Abuse													
		TOTAL	Friends	Digital or online community	Family members/partner	A teacher or mentor at school/college	health-care services	LGBT+ support service or community organisation	domestic abuse helpline	general counsellor or therapist	Police	Did not talk to anyone	Disclosed to other
Gender													
Woman inc trans women	27	66.7%	18.5%	14.8%	11.1%	14.8%	14.8%	7.4%	25.9%	11.1%	14.8%	14.8%	
Man or boy inc trans men	22	50%	40.9%	9.1%	9.1%	4.5%	9.1%	4.5%	9.1%	0%	18.2%	13.6%	
Non-Binary	13	69.2%	15.4%	0%	7.7%	15.4%	23.1%	7.7%	7.7%	0%	15.4%	15.4%	
Questioning/unsure	4	75%	100%	25%	50%	25%	0%	50%	0%	0%	0%	0%	
Trans history													
No	41	68.3%	26.8%	17.1%	12.2%	17.1%	9.8%	7.3%	22%	7.3%	14.6%	12.2%	
Yes	19	52.6%	42.1%	0%	10.5%	5.3%	21.1%	5.3%	15.8%	0%	15.8%	15.8%	
Partially	4	50%	0%	0%	25%	0%	25%	0%	0%	0%	25%	0%	
Unsure	2	50%	50%	0%	0%	50%	0%	0%	0%	0%	0%	50%	
Sexual orientation?													
Asexual	5	60%	0%	0%	40%	20%	20%	20%	20%	0%	20%	20%	
Gay	12	58.3%	33.3%	16.7%	0%	8.3%	8.3%	0%	8.3%	0%	16.7%	25%	
Lesbian	12	58.3%	16.7%	8.3%	8.3%	33.3%	8.3%	8.3%	25%	8.3%	25%	8.3%	
Heterosexual	3	33.3%	33.3%	0%	0%	0%	0%	33.3%	0%	0%	33.3%	33.3%	
Bisexual or Pansexual	27	70.4%	44.4%	7.4%	14.8%	11.1%	14.8%	7.4%	22.2%	3.7%	14.8%	7.4%	
Queer	7	57.1%	14.3%	28.6%	14.3%	0%	0%	0%	14.3%	0%	0%	14.3%	
Prefer not to say	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	

ity, Diversity and Inclusion] is at the forefront of our working (domestic abuse practitioner)

Whilst the low numbers responding necessarily make any findings extremely tentative, there are some findings worth considering in the context of this article's focus on family abuse and the help-seeking practices of queer folk. It was striking how few respondents reported that their service routinely asks service users about their gender and sexuality. Only one respondent working in a domestic abuse service and one social care respondent say they believe this to be the case about identities of both gender and sexuality, while 15 respondents report that their services do not ask service users about either aspect of their identity. If the sexuality and gender identities of service users are not routinely monitored this can communicate a message to (potential) queer service users that the service is not necessarily trustworthy and/or able to understand their needs. Without knowing a service user's identities of sexuality and gender, practitioners might not ask the correct questions, particularly about identity abuse, to allow disclosure of family abuse victimisation. By not monitoring for sexuality and gender identity, and not exploring who the perpetrators are, practitioners do not get a full picture of their clients and might underestimate or minimise the risks they are facing.

Some respondents explain that they feel there are more pressing issues than questions about gender and sexuality to address with service users upon first meeting them, and that this is something they might revisit later in the process. In the interviews, some professionals say that they feel uncomfortable asking these questions, or have received complaints that the questions are too personal:

It's one of the assessment questions, though I don't think, personally, it's like any form that you fill in, in reality I don't think I do. When I complete an assessment if there are questions they don't want to answer they can say 'sorry I don't want to answer'... so I give them that option, because it's irrelevant really, your sexuality, you want to be seen as an individual person and the support you need to get (Interview 2)

In an area where, as the survey of queer folk suggests, mainstream services are not the first port of call for those victimised by family abuse, it might be expected that professionals come to expect and normalise that those victimised by domestic abuse are cis, heterosexual women. Professionals might never expect to come across queer folk and if they do, they might be forgiven for feeling under confident about how best to respond. Nineteen practitioners said they have received no training about working with LGBT+ people and only 5 have had specialist training on LGBT+ domestic abuse, all of whom were from domestic abuse services.

The invisibility of queer people in services in a County in England was mirrored in their more general invisibility as local citizens of the area. Queer and practitioner interviewees were in agreement that there are no specific LGBT+ services in Central Bedfordshire, aside from one LGBT+ youth club. The geography of the area results in there being no large town to serve as a focal point. For those who rely on public transport (e.g. young queer people) it is difficult to travel independently to any service. The current lack of visibility has profound impacts for LGBT+ residents, as this young person explains:

I would like to see a celebration of LGBTQ in a County in England as there is nothing and it feels like we don't exist and are not part of the community (Youth group participant)

Professionals spoke of an LGBT+ service in a neighbouring town, which had been accessed by a sizeable number of residents in Central Bedfordshire before it was decommissioned. This demonstrates that when LGBT+ services exist, and they have had time to establish themselves and build up a visible presence, they are well used by the community:

We had in effect around 200 service users who were accessing the service in [nearby city] but it kind of crosses over and there was nothing in [Central Bedfordshire] ... at all, so we actually used to take a lot of customers who were coming from outside our remit area... [the project has] since been decommissioned and there's no specialist services as far as I'm aware in a Central Bedfordshire (Interview 6)

There exists a debate about whether specialist services are necessary if generic services are able to provide an appropriate service for all service users (Donovan and Durey, 2018). The following practitioner describes their experience of trying to make a case for increasing specialist LGBT+ youth provision:

I'll be honest, when we first tried to raise it a few years ago we were kind of closed down a little bit, in terms of 'well everyone should be able to attend the same provision' and we get that and of course they are attending the mainstream youth clubs but actually, sometimes, it's nice for them to have their own groups as well (Interview 3)

Whilst theoretically it is possible for generic services to provide services for all service users, in reality and, as we see in the findings from Central Bedfordshire both queer folk and practitioners agree that generic services are not necessarily able to provide an appropriate, inclusive or welcoming service to LGBT+ individuals. One professional explains:

I wouldn't say that any of our services make it clear that they would be LGBTQ friendly in any way, and there was some resistance I think – it comes from a well-intentioned place, but they don't seem to think that they would need to let people know that they were being inclusive (Interview 4)

Another practitioner explained that they were 'fairly typical' in that they are 'not doing all that much' (Interview 5) in relation to providing a service for queer service users.

LGBT+ lives are not only invisible in the generic and specialist domestic abuse services but also in the political and civic life of Central Bedfordshire. Respondents talked about how they rarely hear any local politician talk about queer people, their needs or issues. Several respondents mentioned the Rainbow flag and the fact that whilst one does exist, it has only been flown once in their memory when a member of the LGBT+ community was chair of the council. In the following excerpt, both of these points are raised – how powerful the silence of civic leaders about queer lives is and the symbolism of the Rainbow flag:

I don't think I've ever seen any corporate communication around it, ... and I've never actually seen anything to come out that says 'this month is' ... until this survey... we've only ever had the LGBT flag fly once at the offices, ... and that was when the chair of the council was actually a member of the LGBT community themselves (Interview 3)

Not being visible as an authentic and legitimate citizen can have profound impacts, especially when help is needed. A trans woman who took part in an interview points to the role of a local politician in creating a transphobic environment. There are no specific support services for trans people in Central Bedfordshire and this respondent was clear about why this might be the case:

It's very difficult that we have a very transphobic MP who delights in amplifying transphobic viewpoints and opinions which have, you know, I think that telegraphs itself into the local council and local services which means it feels to me like Central Bedfordshire is a very hostile environment for LGBT+ people and that's really hard (Queer Interview)

Another practitioner conveys how, in school, an unwelcoming environment is reinforced, not

only by the inaction of teachers, but by their collusion with it:

In terms of abuse and bullying, one of the things that we will be told by all young people we work with across the spectrum is 'if we had a pound for every time they'd heard "that's gay" come out of a student's mouth and a teacher just chuckle and walk

on past, they'd be millionaires by now. (Interview 3)

A queer youth group member was in agreement that this environment had impacted on them negatively:

[T]here was a lot of homophobic language and behaviour that went unchallenged and I don't think the schools realise the impact this has on LGBT+ young people in terms of their mental health, and self-esteem. A more inclusive environment in schools and colleges is a must, and the challenging of inappropriate language (Youth group participant)

These experiences contribute to a lack of trust in professionals by queer individuals. A number of queer people gave feedback that if they needed help or support they would be most likely to approach a professional they already knew, and trusted to be accepting of their identity:

Because there is still a lot of people who think being LGBTQ is wrong, I am always anxious about who I can trust and who won't judge me (Youth group participant) I have felt nervous asking some people because of being judged, so I stick to asking people that I feel safe with (Youth group participant)

These comments reinforce the point that professionals need to know the identities of sexuality and gender of their service users so that they are able to communicate acceptance and create a trusting relationship with them. The impacts of the current circumstances are stark. Not feeling visible, not seeing themselves in local services or local civic life, not feeling welcome in schools and in their neighbourhoods, not feeling welcomed by some civic and political leaders, these all have consequences for local LGBT+ people's lives. Their lack of visibility needs to be understood as structural discrimination that requires systemic and structural redress not only by individual organisations but by local (and central) government.

This study, as has previous research (Donovan and Hester, 2011), demonstrates that when LGBT+ people experience domestic abuse they are extremely unlikely to use local domestic abuse or mainstream services for help and support. This is what Donovan and Hester (2011) call the gap of trust between themselves and service providers. They do not know whether they will be safe if they come forward to use services: whether they will be respected, whether they will receive an appropriate service response for their needs, whether their sexuality and/or gender identity will be problematised. A bisexual woman interviewee describes what becomes an experience of isolation and wariness:

I do think that this [a County in England] isn't a very aware place, there's really no sense of queer community. I do know a few other people in the area who would identify as LGBT but not many and like, it

sounds bad but you do try not to draw attention to it. I think my partner is quite self-conscious with her kid's school. Last year it was hard trying to be involved with activities but also feeling like we're going to stand out, or someone is going to complain. I don't think anyone has said anything, but it is something I worry about and I'm not sure which side the school would take, but there's not really a viable alternative because of the distance, so we're a bit stuck and do have to be a bit careful sometimes (Queer Interview 2)

Questions of visibility and safety which are integrally entwined are central to whether queer folk victimised by family abuse can contemplate seeking formal help, whether professionals are able to communicate acceptance, respect and develop trust, as well as whether professionals can ask the correct questions about how their service users' identities are implicated in the victimisation they have experienced by family members. Whilst there might be a range of similar ways that queer and cis, heterosexual women (and men) are victimised by family members, being able to speak openly about identity abuse produces an account that more explicitly speaks to the particular ways that family abuse can be motivated and justified; as well as providing key factors that might influence the response from practitioners.

Conclusion

This study has presented four interconnecting findings from a local study. First, that family abuse is a significant problem for queer people, that it is not only reported by queer people from racially minoritised communities and that, in this study, trans and disabled respondents were more likely to report family abuse. Identity abuse was the second most often reported type of family abuse after emotional abuse. Though out of the scope of this paper, we suggest there should be more research into how central identity abuse appears to be to family abuse victimisation and whether this rather than "honour" might take the focus away from racially minoritised communities and communities of faith and onto any family relationships where abuse takes place.

The second finding is that help-seeking practices show existing statutory and third sector services for domestic abuse are not the first port of call for queer folk victimised by family abuse. Instead, participants seek help from informal sources of help, friends especially, and turn to counselling/therapeutic sources of support. This might be a result of the public story of DA which constructs physical violence as the defining form of abuse and adult intimacy as the relationship most associated with DA. Most family abuse reported in this study is not physical or sexual abuse and the perpetrators are

family members. These factors combined might result in queer folk deciding that their victimisation does not warrant or qualify for help from domestic abuse help-providers. The third finding is practitioners' responses which suggest that they lack training about the particular ways queer people might be victimised and the importance of asking about the gender and/or sexuality of their clients. Finally, living in an area where queer folk are not visibly recognised and encouraged as active citizens to be part of civic life, to be employed in public and third sector services and/or to be service users, has an impact on their perceptions about how safe it is to live openly as members of local LGBT+ communities.

Help-seeking for family abuse is dependent on several factors. Family abuse needs to be properly identified in practice, as it is in the statutory definition, as being an aspect of domestic abuse; and recognised as a possible social problem across all communities. There is also a need for help-providing organisations to be open and able to respond appropriately to queer service users, especially as research shows that provision of specialist LGBT+ domestic abuse services is geographically uneven across England (Donovan et al., 2021). Whilst individual practitioners and individual organisations can and do attempt to affect change, this is limited when there is not a joined up strategic and structural approach that provides a framework for visibility and inclusivity of all those victimised of domestic abuse including family abuse. In this study there is evidence of a lack of appropriate training for practitioners, for example, in monitoring for sexuality and gender identity, and in family abuse affecting queer folk. Having services that explicitly invite queer folk into them can send a message about inclusivity, recognition of diverse needs, and respectful treatment in delivery of services. The broader local and national contexts are also implicated in this study in recognising the ways in which structural discrimination against queer folk renders their lives not only invisible but also as less valuable than their cis, heterosexual counterparts. This can have an impact on the self-confidence and sense of self of queer folk and impact on their sense of safety about being out, either as employees in publicly funded services and/or as service users. Active citizens need to be purposefully produced in conditions where their engagement and participation is invited and welcomed by local structures of authority (McGhee, 2003; Moran, 2007). Structural discrimination can only be addressed structurally with local and national commitments to address discrimination and develop more inclusive policy and practice. At the local level this should include an active invitation to queer folk from local government, which is reinforced by local organisations, to participate as local citizens, as, employees and service users in the development of local services, including those for family abuse victimisation.

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Declarations

Conflict of Interest The authors confirm that there are no conflicts of interest for them in authoring this work.

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