

Southwest Indigenous Women's Coalition
Training & Technical Assistance
Participant Questionnaire

Please complete this short questionnaire to assist us in better understanding your individual and programmatic needs regarding Sexual and Intimate Partner Violence among the Native Lesbian, Gay, Bisexual, Transgender, and Two-Spirit (LGBT2S) community.

What Organization do you represent?

Tribal Program (Specify):

- Community Based Organization
- Domestic Violence Shelter
- Tribal Law Enforcement
- Other Law Enforcement
- Tribal Court

Indian Health Service

Other Tribal Health Service (Specify):

- Educational Institution
- Tribal Coalition
- LGBT Organization
- Community Member

What is your current position?

- Program Director/Manager
- Program Manager
- Supervisor
- Advocate
- Counselor

Outreach Coordinator/Worker

- Volunteer
- Community Member
- Other:

What kind of LGBT2S victimization are you seeing in your community? (Check all that apply)

- Hate
- Intimate Partner Violence
- Trafficking
- Other: _____

- Bullying
- Sexual Assault
- Murder

In regards to Hate crimes, what have been the motivation indicators? (Check all that apply)

- Anti-LGBQ/Homophobia/Biphobia
- Anti-Sex worker
- Anti-Transgender/Transphobia
- Other: _____

- HIV/AIDS-related
- Racist/anti-ethnic
- Sexist

Please list all LGBT2S services provided in your area:

I am not aware of any LGBT2S services in my area.

Education and Training Needs (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> LGB2S 101 | <input type="checkbox"/> LGBT2S DV/IPV Statistics |
| <input type="checkbox"/> Transgender 101 | <input type="checkbox"/> HIV/AIDS 101 |
| <input type="checkbox"/> LGBT2S Sensitivity | <input type="checkbox"/> HIV/AIDS & DV/IPV |
| <input type="checkbox"/> Other: _____ | |

Technical Assistance & Capacity Building Needs (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Program Policy and Procedures Development | <input type="checkbox"/> HIV/AIDS Program & Shelter Policy Development |
| <input type="checkbox"/> LGBT2S-specific Shelter Policy Development | <input type="checkbox"/> HIV/AIDS Screening & Assessment Tools Development |
| <input type="checkbox"/> Staff Sensitivity Training Curriculum Development | <input type="checkbox"/> Universal Precautions Policy Development |
| <input type="checkbox"/> Law Enforcement Response | <input type="checkbox"/> Linkage to HIV Services Protocol Development |
| <input type="checkbox"/> LGBT2S-inclusive Screening & Assessment Tools Development | |
| <input type="checkbox"/> Culturally Appropriate LGBT2S DV/IPV Resource Materials Development | |
| <input type="checkbox"/> Other: _____ | |

Thank You!