Welcome & Housekeeping

- Take care of yourself
- PowerPoints
- Recording

Navigation tool: Questions

Worksheet

- Trans Basics
- Data: Trans Violence
- Trans-Specific Barriers
  - Working with Rural Survivors
- Shelter and Safety Planning
- What You Can Do!
- Questions
Who is FORGE?

21st Anniversary

Direct service / TTA

25%

75%

Two Foundational Principles

1. Trauma - Informed
2. Empowerment - based

Small staff, large vision

michael munson
Executive Director

Loree Cook-Daniels
Policy & Programming

Katie Taylor
Project Coordinator

What we can offer you

- Training and technical assistance
  - 1-on-1 support
  - Webinars
  - Training
  - Publications

- Support for transgender survivors
  - Listservs
  - Referrals
  - Writing to Heal
  - Espavo Project
  - Publications

Trans Basics

Core concepts
Slippery definitions
Getting on the same page
Question

What % of population is transgender?
A. 0.5%
B. 1.7%
C. 3.0%

How many people are trans?

0.3% → 1%

Williams Institute
Lynn Conway (and others)

Master Status

- 1940s - Everett Hughes defined it as “master status.”

Master Status/ Primary Potency

- Both terms refer to the tendency of observers to believe that one label or demographic category is “more significant than any other aspect of [the observed person’s] background, behavior, or performance.”

Terms Paradox: Definition

- Terms are CRUCIAL
  - Finding out what terms the person uses and then using their language is a primary way of conveying respect and openness.
- Terms are MEANINGLESS
  - Terms tell you none of what you need to know to provide appropriate services.

Terms Paradox: Applies to who?

- The terms paradox can be applied to
  - Identity labels
  - Experiences
  - Personal history
  - Body part names
  - Pronouns
  - Nearly any component of who a person is.
Who are we talking about?

- Gender non-conforming
- People who transition
- People who are questioning
- People who do not fit into the binary

Goal: More expansive view

Defining terms just gives us more labels to assign to people, rather than truly understanding who each person is.

Who else?

- Gender-conforming people of trans history
- Multiply gendered people
- SOFFAs (Significant Others, Friends, Family and Allies)
- *** and many others

Clarity: Trans-feminine

Clarity: Trans-masculine
Clarity: Non-binary or agender

Language: “I don’t get it!”

- “Just tell me what language to use”
- Reality: There isn’t a list of “right” or “wrong” language or behaviors

“How do I get it right?”

Data: Transgender Rates of Violence

“Stories are just data with a soul.”

“Transgender and gender non-conforming people face injustice at every turn: in childhood homes, in school systems that promise to shelter and educate, in harsh and exclusionary workplaces, at the grocery store, the hotel front desk, in doctors’ offices and emergency rooms, before judges and at the hands of landlords, police officers, health care workers and other service providers.”

~NTDS

Dr. Brené Brown
“Researcher Storyteller”
University of Houston

www.forge-forward.org

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Data Sources

- Some data is supported by multiple sources
- National Center for Transgender Equality (NCTE) -- Injustice at Every Turn

Question

What percentage of trans people experience sexual violence?

A. 18%
B. 33%
C. 50%

Answer: C. > 50%

Answer: A. 12%

Was gender a contributing factor?

- Yes 43%
- No

Question

How many trans individuals experienced sexual violence when in grades K-12?

A. 12%
B. 21%
C. 35%

Answer: A. 12%

NTDS, 2011 (n=6400)
4 Question

How many trans people were sexually assaulted by a female perpetrator?

A. 12%
B. 18%
C. 29%

Answer: C. 29% +

5 Question

How many trans people are physically assaulted by a health care provider?

A. 16%
B. 26%
C. 36%

Answer: B. 26%

6 Question

Domestic violence is _____ for trans people (compared to non-trans people).

A. Lower
B. The Same
C. Higher
**Question 7**

How many trans people are sexually assaulted in homeless shelters?

- A. 22%
- B. 25%
- C. 29%

**Answer:** B. The Same (~)

Intimate Partner violence

- General population: ~25%

**Question 8**

How many trans people have attempted suicide?

- A. 11%
- B. 21%
- C. 41%

**Answer:** C. 41% +
Increased risk: Health implications

Attempted suicide: 65% (IPV), 32% (No-IPV)
Homelessness: 44% (IPV), 9% (No-IPV)
Substance use: 47% (IPV), 19% (No-IPV)
Sex work: 29% (IPV), 7% (No-IPV)

Rates of Violence by Gender Vector

Child SA: 50% (MTF), 50% (FTM)
Adult SA: 33% (MTF), 31% (FTM)
Dating: 23% (MTF), 36% (FTM)
DV: 18% (MTF), 29% (FTM)
Stalking: 2% (MTF), 9% (FTM)
Hate Violence: 2% (MTF), 7% (FTM)

Polyvictimization

Hate-motivated: 74%
Stalking: 84%
IPV: 76%
Dating violence: 88%
Adult SA: 72%
CSA: 64%

Barriers to service

1. Fear
2. Not trans-welcoming/friendly
3. Not culturally competent
4. Didn’t know what the service was
5. Reputation
6. Woman-focused
7. Shame / embarrassment / stigma
8. Concern it would make things worse
9. Systemic problems
10. Cost

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po box 1272 | milwaukee, wi 53201
1. Fear

- ... of abuse, hostility, rejection, derision, judgment, discrimination
- ... of being outed
- ... of other clients
- ... of denial of services
- ... of police misconduct
- ... of being the only trans person in the group

Barriers

1. Fear → Documentation

- “Incongruent” identification
  - Used to deny services
  - Trans person may fear being outed
- Cost may be a barrier to change
  - Not always possible (e.g. birth certificate)

Barriers

1. Fear

- Fear of being outed
- Confidentiality and dual relationships are huge issues for trans survivors and agencies
- Fear of splitting the community

Rural

2. Trans-welcoming/friendly

- Trans-welcoming = Does a trans person sense that the environment and attitude are friendly and respectful?
  - Will people be “comfortable” with me?
  - Will I be “accepted”?
  - Will people be hostile?

Barriers

2. Trans-welcoming/friendly

Challenge

- Rural areas are sometimes more conservative and traditional...and homophobic/transphobic

Positive!

- Rural communities also do a great job looking after their own

Rural
3. Cultural competency

- Cultural competency = Is an agency informed on how to respectfully treat trans people when they walk in the door?
  - Will I be asked invasive questions?
  - Will they use my name and pronouns correctly?
  - Will I have to educate my provider?
  - Can they deal with my body?

3. Cultural competency

- Smaller and more conservative areas may have less trained staff and volunteers.

4. Don’t know what service is/ unavailable

- Unaware of what services are available (e.g. crime victim compensation)
  - “What is this?”
  - “Don’t know where to find it”

4. Don’t know what service is/ unavailable

- Rural survivors may not have access in their area
- Rural trans people (especially youth) often look for support online

5. Reputation

- Lack of positive experiences
- Spread by word of mouth
- Tightly knit trans+ community
- One negative experience (or story) can quickly reverse a positive reputation

5. Reputation

- Broad range of services in single agencies
- Safety concerns

Joe LeBlanc
(photo by Horace Long at Just Out)
6. Woman-focused

- Name of agency
- Unclear policies of who is served
- Agency language = only female references
- Feelings of erasure
- Hopelessness of where else to seek services

6. Woman-focused

- “Traditional” beliefs and models of service

7. Shame/embarrassment/stigma

- Generalized (many survivors experience)
- “Invasiveness” (especially if physical exam)
- Specific e.g. sex work, SV within IPV and wanting to “protect” the community
- “It can’t happen to me” – beliefs especially with trans men

7. Shame/embarrassment/stigma

- Complicated self-blame
- Isolation
- Concerns about coming out and disclosure

8. Make things worse

- Trigger concerns
- Unhelpful experience with services in the past
- (Survivor) Lack of knowledge (e.g. that they don’t have to tell the story or report to police)

8. Make things worse

- Fear of retaliation
- Gang assaults
- Small community – can’t get away from perpetrator
- Pressure to not “air our dirty laundry”
9. Systemic problems

- Survivors not believed
- Legal system re-victimizes
- Few successful prosecutions
- Hoop-jumping for services
- Long wait times

Rural

- Healthcare providers, law enforcement agencies, and other service providers are sparse
- Social inequities affect healthcare and justice options

10. Cost

- Employment discrimination – often in low paying jobs (or unemployed)
- No/minimal insurance
- Cost + fear of poor service
- May have high out of pocket costs (for other services)

10. Cost → Maslow’s hierarchy

- Access to basic resources
  - Food, Shelter, Education, Work
- Basic needs may be a priority above healing
- Cost of service can be prohibitive

Rural

- Poor communities
- Poor agencies
Everyone deserves to have access to healing services and a life not ruled by trauma

Rural

Trans people are diverse.

Rural communities are complex.

It’s true! Trans people live in the country, often by choice and with happiness.

Shelter

Providing safety and shelter to all survivors is both the right thing to do and, in most cases, it’s also required by law.

VAWA Reauthorization: What’s new?

“No person in the United States shall, on the basis of actual or perceived race, color, religion, national origin, sex, gender identity, sexual orientation, or disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part with funds made available under [VAWA], and any other program or activity funded in whole or in part with funds appropriated for grants, cooperative agreements, and other assistance administered by the Office on Violence Against Women.”

DOJ Guidance FAQ

Guidance issued on April 9, 2014

Provides answers to key questions grantees might have about the new non-discrimination conditions

18 common questions addressed in FAQ
Transgender Survivors – Nebraska Coalition
August 19, 2015

Name and pronouns
- Ask
- Listen
- Use

Bathrooms

T/LGBT materials

VAWA non-discrimination
www.ovw.usdoj.gov/docs/faqs-ngc-vawa.pdf

Know the resources available

Address SURVIVOR’s needs
"Together we help each other heal."
Carmen, Cori and Jenn
Maybe I’ve been doing this too long, but in preparing to do a presentation for a local organization this week, all I keep thinking is that I want to walk in and say “trans women are women, trans men are men, and some people are neither or both. Don’t worry about their genitals, their socialization, or anything except whatever services you’re providing for them. Ask everyone what name & pronoun they prefer for themselves, and then use them.”
</end Trans 101>

& Obviously, I know it’s not that simple, but it really kind of is, isn’t it?
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Thank you!

michael munson

mmunson@forge-forward.org

Loree Cook-Daniels

LoreeCD@aol.com