Expanding Our Understanding of Gendered Violence

Violence Against Trans People and Their Loved Ones

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There is little national or international research about the prevalence and frequency of violence against trans people or of relationship abuse experienced by trans people. Anecdotal information and some research suggest that trans people may be more vulnerable to violence across their lifespan than the general population.

This article examines some of the factors that increase the vulnerability of trans people to violence; provides a brief overview of forms of violence and abuse experienced by trans people; and addresses strategies to increase the anti-violence sector’s ability to meet the needs of trans survivors of abuse and violence.

Introduction: Trans Basics

Over the last 40 years activists from feminist, anti-racist, disability, gay/lesbian/bisexual, and other social justice movements have made great strides in challenging Canadian society as a whole to think critically about what it means to be a “real” woman or man; to recognize gender norms conventionally associated with femininity and masculinity as being more stereotype than fact; and to rethink gender as a social construct tied to other constructs such as “race” and class, rather than a biological “truth.”

Behavioural gender norms depend not only on the societal norms in a particular place at a particular moment in history, but also on the details of context. For example, the norms of “appropriate” clothing, hairstyle, speech, posture, and other aspects of behaviour for a woman in Canada depends not only on gender, but also on what kind of work that woman does, her perceived class and “race,” whether she’s in an urban or rural setting, how old she is, the size and shape of her body, etc.

While the precise norms of gender behaviour vary greatly depending on context, there are also gender norms that are often taken for granted as biological or “natural” and considered to apply to everyone regardless of context:

• There are two genders: boy/man and girl/woman.
• Your gender is determined by the body you’re born with, and stays the same throughout your life.
• Your body determines how you feel about yourself and how you want others to perceive you.

• Going outside prevailing gender norms, or loving someone who does, is a sign of sexual deviance.

These gender norms affect all of us, shaping our personal, family, and community decisions about how to interact with each other, how to understand ourselves, and how to structure public services and institutions. We live in a society where it is extremely important to know if someone is a man or a woman, and where there are assumptions about a person’s history, experiences, and feelings based on what we believe their gender is.

For many people, these rules feel confining—having to squish yourself into a label that doesn’t really describe the fullness of who you are, having to operate under somebody else’s decisions about what is good and what is bad, and prejudicing our interactions with people based on our assumptions about their gender. And for people who are visibly or publicly gender-variant, there’s not only the pain of feeling like you don’t fit in, but the tremendous burden of other people’s reactions. In some cultures and times, trans people and their loved ones have been accepted or revered, and in others reviled, feared, or ignored (Feinberg; Jacobs, Thomas, and Lang). In the dominant culture of present-day Canada,
gender-variant people are often subjected to curiosity, rejection, fear, hatred, harassment, discrimination, and violence.

In the last decade, the umbrella term transgender (abbreviated as trans) has been used to describe a wide diversity of people whose identity, history, or way of expressing themselves does not conform to prevailing social norms relating to gender. This may include crossdressers, drag kings/queens, transsexuals, people who are androgynous, Two-Spirit people, people who are bi-gendered or multi-gendered, butches and sissies, and people who do not identify with any gender labels. The loved ones of trans people are sometimes called SOFFAs—an acronym for significant others, family members, friends, and allies.

In an effort to become more inclusive of trans people, many lesbian/gay/bisexual organizations have added a “T” for trans, and now use the term LGBT. While this does meet the needs of some trans people who feel connected to the LGB/“queer” community, it can also be confusing in equating sexual orientation—who a person is romantically and erotically attracted to—and gender. Although there are shared experiences common to the LGB and trans communities—for example, shame, social isolation, prejudice and discrimination, and hate crimes—trans people of all sexual orientations have specific concerns that do not overlap with the LGB community. A solid understanding of these trans-specific issues is necessary for anti-violence agencies.

Trans-Specific Violence

It is impossible to discuss the extent of violence against trans people with any certainty, as current tracking mechanisms are problematic. Reporting focuses on interpersonal violence between adults, with little consideration of institutional/systemic violence or violence against youth.

Even the usual sources of reporting of interpersonal violence are largely unavailable to trans survivors: police and emergency medical services are compromised options because of their histories of violence against trans people, particularly sex trade workers and prisoners (Daley, Kugler and Hirschmann; Feinberg); gendered anti-violence organizations—often the first line of contact for survivors—are often inaccessible because of general public uncertainty whether they provide services to trans survivors and if so, under what conditions (Ross; Cope and Dark); Darke and Cope; White). Additionally, violence against trans people is frequently monitored within the rubric of LGBT violence, with no distinction between homophobic and transphobic violence (BC Hate Crimes Team; NCAVP; NYCGLAVP), and no acknowledgment of violence against the loved ones of trans people as part of violence against the trans community (Cook-Daniels). Reporting also fails to account for multiple reasons for violence, including the ways that identities and experiences of trans survivors are racialized, classed, and otherwise constructed.

To date, hate crimes are the most commonly tracked form of violence against trans people. Although not typically included in discussions of family violence, reports indicate that a significant number of trans survivors knew the perpetrator, unlike other hate crimes where the perpetrator is usually a stranger (BC Hate Crimes Team). This challenges conventional understanding of hate crimes as “public” and as distinct from family and relationship violence.

The Gender, Violence and Resource Access Survey of trans and intersex survivors conducted by the Survivor Project in 1998 is the most specific research on relationship violence to date. Preliminary results found that:

[Fifty] per cent of respondents had been raped or assaulted by a romantic partner, though only 62 per cent of those raped or assaulted (31 per cent of the total sample) identified themselves as survivors of domestic violence when explicitly asked. (Courvant & Cook-Daniels 2)

The Transgender Sexual Violence Project conducted by FORGE in 2004, found that 29 per cent of project respondents had been sexually assaulted by an intimate partner while 40 per cent had been assaulted by family members. Project findings also reveal that “48 per cent of respondents were assaulted more than once” (Munson and Cook-Daniels 2005).

Including multiple forms of identity alters our understanding of violence against trans people in significant ways. In hate crimes, for example, where specific gender identity was recorded, the researchers found that 98 per cent of all transgender violence was perpetrated against people in the male-to-female spectrum (Currah and Minter 10); of the 38 murders of trans people reported internationally in 2003, 70 per cent were women of colour (Smith). In other examples, where race, class and/or sexual identity are considered, it is unclear whether crimes were motivated by gender, race or sexual identity, challenging theories of violence that privilege gender over all other
identities (Darke and Cope; Goldberg 2003; Lombardi, Wilchins, Priesing, and Malouf; White).

Within the complexities of identity and violence, trans people may experience forms of violence and abuse that have specific transphobic elements. For example, physical and sexual violence may include assault, mutilation or denigration of body parts such as chest, genitals, and hair discrimination by health and social service providers. Those who do seek assistance face numerous barriers to accessing help.

A significant barrier to trans survivors and loved ones accessing anti-violence and related services is the adherence to conventional definitions of gender. Survivors who fall outside of these definitions are routinely erased from access to even the most basic care and support that these systems may offer. The tyranny of passing as non-trans and the systemic violence of not passing cannot be underscored enough in trans survivors’ lives.

Still other services for survivors define their client criteria in ways that are exclusive of trans people, or will take trans people only if they agree not to exhibit any cross-gendered expression or disclose information relating to being trans.

While some anti-violence services accept trans clients, most anti-violence personnel are not aware of the specific issues affecting trans survivors, lack information about the specific medical concerns trans survivors of abuse may have, and may be dismissive of the societal barriers faced by trans people in seeking to establish a life outside the abusive relationship (e.g., difficulty finding work, finding new social contacts). Trans-inclusion policies are only the first step in trans accessibility; additional efforts are needed to make services fully inclusive.

**Barriers to Accessing Anti-Violence Services**

Despite the high rates of violence experienced by trans people, many trans people are reluctant to seek assistance due to past experiences of that signify specific cultural notions of gender. Economic abuse may include withdrawal of financial support related to trans-specific care (e.g., electrolysis, hormones, surgeries) or of financial support in general, and/or exploitation of the victim’s financial dependence by demands for financial compensation or payback through prostitution or the drug trade. Emotional/verbal abuse may include ridicule of cross-gendered behaviour or appearance; threats to limit or prohibit access to children or services; and threats to reveal the victim’s gender identity to employers, financial aid workers, health care workers, immigration personnel, or anyone else with possible influence or control over the survivor’s well-being (Goldberg 2003, 2004). Loved ones of trans people may also experience trans-specific forms of violence and abuse—including the use of societal transphobia as an excuse for abusive behaviours (Munson and Cook-Daniels 2003).¹

**Strategies for Inclusion**

To be competent to provide service to trans people and loved ones, anti-violence agencies must:

- be fully comfortable working with people with diverse gender identities and cultural beliefs about gender;
- be able to engage clients in exploring the connections between violence and gender oppression;
- be aware of the legal, medical, and social issues that impact trans people and loved ones who are survivors of violence;
- understand the social, legal, and economic factors that increase the vulnerability of trans people and loved ones to violence and that make it more difficult to leave abusive relationships;
- reduce the barriers that make it difficult for trans people and loved ones to report and seek services relating violence;
- incorporate gender diversity in anti-violence education and prevention efforts;
- develop policy and procedures relating to safe environments for trans/SOFFA staff, volunteers, and clients;
- have mechanisms to evaluate the agency’s effectiveness in working with the trans community.

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1For tools to aid in assessment of trans-specific violence, see White and Goldberg (in press).

References


