



# Transgender Sexual Violence Project

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*FORGE: A national education and advocacy organization supporting FTM+s and SOFFAs*

## Community Dialogue Report

December 28, 2004

The groundbreaking Community Dialogue on Sexual Violence within the Transgender Community convened at the Milwaukee LGBT Community Center on November 12, 2004. The Dialogue was sponsored by the Transgender Sexual Violence Project, which is a venture of FORGE (For Ourselves: Reworking Gender Expression), a national education, advocacy and support organization.

For three very full, emotional hours, 13 community members shared their stories; related their experiences with service providers; discussed barriers to services; explored the relationship(s) between body, gender and sexual violence; and provided support and hope to fellow survivors.

Entering the dialogue, the facilitators anticipated a detailed discussion around the intersection of sexual violence and transgenderism, highlighting and exploring issues that are unique at that juncture. Quickly, we discovered that participants' needs and experiences took us in a completely different direction.

Almost immediately after proposing the initial question regarding the availability of services, participants began emotionally expounding on their overall sense of hopelessness about the abuse/assaults they experienced and their lack of belief that healing from those incidents was possible. Many individuals relayed that their experiences with providers was dominated by pervasive doubt that the sexual violence had actually occurred. An overwhelming number of individuals reported being accused by their providers of causing the abuse, were not believed, or were otherwise challenged and not supported in receiving medical services, mental health care, or protection from their perpetrator. It was no surprise, then, when asked about what services they would consider using, many people responded that they would not use ANY services.

In childhood, many were forced to go to therapy -- sometimes by the parent perpetrator him- or herself. The purpose of these referrals seemed to be to confirm to the child s/he was crazy and to divert attention from the parent onto the child. Because the PARENT was bringing the child in, there was an alliance between the therapist and parent, leaving the child and his abuse reality ignored and belittled, with the child being told directly s/he was lying. This, in turn, was sometimes used to "justify" punitive action(s) -- i.e. more abuse.

There was also a lot of anger directed at previous providers, as well as family members and others who were told about the sexual violence. A large number of participants noted that providers loved to hear the stories of the abuse/assaults, but then wouldn't or didn't do anything to help them. Many held the attitude that providers only took their money and did not provide support or useful tools to deal with the trauma. In fact, one attendee felt happy that at last one therapist had at least given his one tool: "It if hurts, don't do it". While this may be an excellent tool in some situations, it seems unlikely to promote resolution or healing.

Others reported that police and other professionals did not believe the abuse/assault happened if physical injuries were not severe. Participants reported that most all providers seemed to have a standard by which they assess their clients to determine if they are believable, if their accounts are "real" or not, and that they mostly somehow failed to meet these standards.

Many attendees suffered multiple abuses/assaults, often an incident in childhood (frequently multiple or ongoing abuse) and one or more incidents as an adult (either by a stranger, acquaintance or intimate partner). In addition to multiple acts of sexual violence, many participants reported that their perpetrator was female or was a transgender intimate partner. The high rate of both multiple assaults AND the high rate of female (or non-male) perpetrators, reportedly further ostracized individuals, creating greater barriers to being believed and receiving appropriate care.

At least half of the Dialogue's attendees have been institutionalized at some point in their lives. This shockingly high figure was even more appalling because the institutionalization was related to either their abuse or their transgender status. When

individuals spoke their truth about being trans or about the severe abuse they experienced, they were institutionalized and further not believed by providers who considered them crazy, freaks, or a danger to themselves or their "alleged" perpetrators.

As a result of the provider mistreatment, lack of skills gained from providers or other support professionals, (the lack of) coping strategies fostered in childhood by family, direct abuse, and challenges with being transgendered in a non-transgender world, many of our attendees reported having suicidal thoughts or making suicide attempts at some point(s) in their lives. In addition to many participants having turned their anger and despair against themselves, many also wished to harm their perpetrator. The level of anger and violence among Dialogue attendees towards their perpetrators was high. Interestingly, many of these same participants believed that they could not get on with their own lives until their abuser was dead.

As noted above, a devastatingly high percentage of attendees did not believe healing was possible -- in fact couldn't even imagine a sense of wholeness and peace without being haunted by their sexually abusive past. While previous service experiences and other factors influenced this belief, it was shocking to learn that many individuals did not believe healing was possible for ANYONE (i.e. it wasn't just their own recovery that they did not have faith in) and they were not aware of the many highly effective healing modalities currently available (e.g. EMDR, bodywork, other trauma approaches).

One of the most positive aspects of the Community Dialogue was that the people who seemed to have the least amount of belief that healing/recovery was possible were able to hear from a select few that there is hope for leading a life that is not uprooted by past abuse/assault. It was eye-opening to some to be able to see and hear some people talk about being in a place where sexual abuse/assault was no longer such a pivotal issue in their lives, but rather just part of their past.

Based on evaluations, the most empowering part of the evening for nearly everyone was being in the same space together, being heard and believed (sometimes for the first time ever), sharing stories, listening to each other, and being able to support each other. This one event created a sense of community and hope that many had never before experienced.

Attendees included an equal number of transgender MTF- and FTM-vectored survivors, two female-identified (natal female) partners (also survivors), two providers (one of which was a male-identified, natal male; one of which was a survivor). 50% of attendees were in the 40s and 33% were in their 50s, with the remainder under 40 years old. Over half of the attendees were both direct and secondary survivors, while 1/3 were direct survivors only. All but one respondent (who reported being asexual), considered themselves to be either bisexual, gay, lesbian or queer (in that order of prevalence). A little more than 1/2 are from Milwaukee, 1/4 live in surrounding areas (20-50 miles away), and 1/4 live farther than 50 miles away.

The Transgender Sexual Violence Project is grateful for the participation of the individuals who were able to attend and share their stories and experiences.

For more information about the Transgender Sexual Violence Project, please go to <http://www.forge-forward.org/transviolence/>. The primary component of the Project (in this phase) focuses around a survey on transgender sexual violence (available online and in paper format). 242 people have responded to the survey so far. You will also find preliminary data (based on 136 survey respondents) on the web at <http://www.forge-forward.org/transviolence/earlydata.php>

We anticipate analyzing the data and publishing more detailed results of both the Community Dialogue and the survey in early 2005.

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