



Understanding the Transgendered Community: A Technical Assistance Bulletin for Sexual Assault Counselors and Advocates

Living as a transgender individual can be difficult. Isolation, misunderstanding, discrimination, harassment, and assault are all part of society's response to individuals with gender identities that do not fit the dichotomous norm.

The term "transgender" encompasses a wide range of individuals and experiences. Definitions of "transgender" remain in flux, which reflects the diversity and complexity of the issue and community. Generally, the transgender community can include any person who does not fit neatly into the binary constructs "male" or "female" or whose gender identity differs from social expectations given their sex at birth. More specifically, the transgender community can include transsexuals, cross-dressers, intersexed individuals, bi-gendered individuals, and others (Munson, 2007).

Within the umbrella term of transgender are many forms of identity. Differentiating between the terms "gender" and "sex" is essential to understanding the transgender community. Gender is a societal construct, defined by expectations of the ways men and women should dress, talk, or act. Sex is biological and refers to the genitalia a person is born with.

Transsexuals identify with a gender that does not match the sex they were born into. Some may choose to transition in order for their physical presentation to better align with their inner gender identity. This transition may or may not include genital reassignment surgery and/or hormonal therapy. It is important to note that not all people need to undergo medical transition in order to feel at home in their bodies, and not all people have equal access to the resources necessary to transition.

Cross-dressers prefer to wear clothing that is different than what is consistent with their gender some or all of the time. Inter-sexed individuals may possess genitalia that are indeterminate (not clearly male or female) or a combination of both male and female genitalia and characteristics. Bi-gendered individuals move between male and female genders, expressing traditionally "masculine" or "feminine" behaviors depending on the situation or context.

These definitions are offered to foster a deeper understanding of the transgender community, not to rigidly label a highly diverse community. It is important to understand that for many, the idea of gender is fluid. While gender is perceived in society as a concrete term, the transgender community refers to "gender identity," a fluid term that allows individuals to decide how they view and/or express their gender. The process of defining the transgender community can seem counterintuitive when taking this fluidity into account.



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Violence in the Lives of the Transgender Community

Transgender individuals are often the targets of extreme forms of discrimination, including hate crimes such as murder, rape and assault. They also experience more covert forms of discrimination in their daily encounters in school, the workplace, the criminal justice system, the healthcare system, and mental health settings, among others. Discrimination against transgender individuals exacerbates their isolation and can obstruct their access to quality education, justice, gainful employment, proper medical and mental health treatment, and social support. This can be especially true in more rural or suburban areas where there may not be a large transgender community and/or supportive organizations.

These realities can create dangerous and traumatic experiences for transgender individuals. For example, many transgender teens are homeless due to a lack of acceptance within their family. The transitioning process, which may often involve taking hormones and/or cross-dressing, is difficult to hide. Often, parents or guardians will refuse to support gender transformation. In some cases where trans youth do not have parental support or access to competent and supportive health care, they may access hormones on the streets, which can be very dangerous and expensive. In order to offer healthcare-especially to check hormone levels-many clinics require parental consent if the patient is under 18. This policy leaves many teens-especially those who are homeless and/or without the support of their parents/guardians-without the critical medical care they need. Also, there is a struggle to pay for basic living expenses. Many transgender individuals cannot find work due to discrimination based on their appearance, and some end up turning to prostitution as a way to survive and fund their gender transition.

Although very little research has been conducted, results of the first national survey on the transgender community (the largest survey of trans-identified individuals) indicates that transgender individuals are at high risk for violence, especially hate crimes (Gender Public Advocacy Coalition, 1997). The study found that 48 percent of the 402 respondents reported having been victims of some kind of assault. In addition, 60 percent reported being a victim of harassment or violence, and 95 percent of the worst incidents involved at least 2-3 perpetrators. The survey presents a sobering picture of the abuse that transgender people face:

- ♦ Verbal Harassment 78%
- ♦ Sexual Harassment 23%
- ♦ Assault (all kinds) 48%
- ♦ Assault w/o weapon 19%
- ♦ Sexual Assault/Rape 18%
- ♦ Assault w/weapon 11%
- ♦ Attempted Assault 9%

Another study involving interviews with 70 individuals in Philadelphia found that 72 percent of male to female transgender individuals had reported being forced to have sex; for female to male transgender individuals, the rate of sexual abuse was 29 percent (ActionAIDS, Inc., Unity, Inc., & University of Pennsylvania, 1997).

Reaching out and Serving Transgender Victims of Sexual Violence

Before you begin community outreach or provide services to a transgender victim, it is essential to explore your own feelings and responses to gender identity and fluidity. What were your gut responses to the information above? It is important to recognize and address all responses and biases, no matter how extreme or embarrassing.

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Transgender individuals live in a society in which the general public, major social systems, and even loved ones reject and/or victimize them because of their gender identity. The rape crisis center should be a haven of acceptance and healing for transgender victims.

Be proactive and reach out!

- ♦ Communities of gay/lesbian/bisexual/transgender/intersexed (GLBTI) individuals exist everywhere. Outreach is important so that you can learn about the GLBTI community and so that community can learn about your center's services.
- ♦ When providing community education programs, mention that your center provides services to all people, regardless of disability, age, race, religion, class, sexual orientation, and gender identity.

Don't make assumptions

- ♦ Avoid definitions and labels.
- ♦ Don't assume someone is a certain gender because they look a certain way. For example, don't assume an effeminate man is gay; she may be transgender (male to female).
- ♦ Don't assume transgendered individuals are gay.
- ♦ Don't assume a person has the genitalia that match their expressed gender. Transgender individuals may take hormones or have gender transformation surgery.
- ♦ Don't assume that clients fit neatly into "male" or "female" when offering gender-specific support groups and services. Consider offering gender-neutral or mixed gender groups and/or allowing clients to choose the group that most closely matches their gender identity.

Watch your language

- ♦ Allow people to self-identify as a particular gender and respect that choice by referring to them by the gender they refer to themselves as.
- ♦ Use "partner" or "significant other" rather than "boyfriend" or "girlfriend." Allow people to define their relationships.
- ♦ When in doubt, ask! "How would you like me to refer to you?" etc.

References

ActionAIDS, Inc., Unity, Inc., & University of Pennsylvania, School of Social Work. (1997). Needs assessment of transgendered people in Philadelphia for HIV/AIDS and other health and social services. Philadelphia, PA: The HIV Commission for the Philadelphia EMA, AIDS Activity Coordinating Office, and Philadelphia Department of Public Health.

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