



Crossing the line:

Lived experience of sexual violence among trans women of colour from culturally and linguistically diverse (CALD) backgrounds in Australia

Key findings and future directions

ANROWS

AUSTRALIA'S NATIONAL RESEARCH
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to Reduce Violence against Women & their Children

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ANROWS Research to policy and practice papers are concise papers that summarise key findings of research on violence against women and their children, including research produced under ANROWS's research program, and provide advice on the implications for policy and practice.

This is an edited summary of key findings from ANROWS research "Crossing the line: Lived experience of sexual violence among trans women of colour from culturally and linguistically diverse backgrounds in Australia". Please consult the ANROWS website for more information on this project and the full project report: Ussher, J. M., Hawkey, A., Perz, J., Liamputtong, P., Marjadi, B., Schmied, V., Dune, T., Sekar, J.A., Ryan, S., Charter, R., Thepsourinthone, J., Noack-Lundberg, K., & Brook, E. (2020). *Crossing the line: Lived experience of sexual violence among trans women of colour from culturally and linguistically diverse (CALD) backgrounds in Australia* (Research report 14/2020). Sydney: ANROWS.

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ANROWS research contributes to the six National Outcomes of the *National Plan to Reduce Violence against Women and their Children 2010-2022*. This research addresses National Plan Outcome 4—Services meet the needs of women and their children experiencing violence.

Acknowledgement of Country

ANROWS acknowledges the Traditional Owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander Elders past, present, and future, and we value Aboriginal and Torres Strait Islander histories, cultures, and knowledge. We are committed to standing and working with Aboriginal and Torres Strait Islander peoples, honouring the truths set out in the [Warawarni-gu Guma Statement](#).

Acknowledgement of lived experiences of violence

ANROWS acknowledges the lives and experiences of the women and children affected by domestic, family and sexual violence who are represented in this report. We recognise the individual stories of courage, hope and resilience that form the basis of ANROWS research.

Caution: Some people may find parts of this content confronting or distressing. Recommended support services include 1800 RESPECT—1800 737 732 and Lifeline—13 11 14.

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Crossing the line: Lived experience of sexual violence among trans women of colour from culturally and linguistically diverse (CALD) backgrounds in Australia

BACKGROUND

- Sexual violence is a pervasive and damaging experience in many women's lives.
- Trans women experience higher rates of sexual violence than cisgender women, with trans women of colour at highest risk.
- The experiences and needs of trans women in relation to sexual violence remain poorly understood by many healthcare providers, legislators, police and policymakers. The experiences and needs of trans women of colour and those from culturally and linguistically diverse (CALD) communities are the least understood.
- The absence of culturally competent information and knowledge about transgender experience, accompanied by misinformation, can lead to stigma, prejudice and discrimination, resulting in unmet needs for trans women. This can have serious consequences for trans women's physical and psychological wellbeing.

KEY FINDINGS

- There are positive implications for trans women's overall health and wellbeing when trans women feel included and accepted.
- Trans women of colour from CALD backgrounds, as well as women who identify as lesbian, bisexual or queer, may experience additional prejudice and discrimination due to the intersection of gender, sexuality, social class, race and religion.
- Support in gender transitioning, through facilitation of access to hormone therapy, reduces the risk of transphobic violence.
- CALD trans women's experiences of gender-based sexual violence are comparable with those of non-CALD trans women and cisgender women, however trans women also experience transphobic violence.

KEY RECOMMENDATIONS

- Conduct further awareness-raising and education for healthcare providers, legislators, police and policymakers, as well as the general public, in relation to transgender experience and gender transitioning.
- Challenge societal attitudes which support, condone or trivialise sexual violence against women, including violence against trans women.
- Ensure policy and practice documents and clinical guidelines use language that is inclusive of gender and sexuality diversity when discussing sexual violence against women.

Trans women of colour experiencing sexual violence are often overlooked

In the era of the #MeToo movement, the social justice campaign which serves to empower women to voice experiences of sexual violence, there is a growing awareness that for many women, sexual violence is everywhere. Sexual violence is so normalised in women's lives that many do not report it, or fear the consequences of making a complaint. Women who report sexual violence are frequently disbelieved—one quarter of Australians are unaware that false allegations of sexual assault are rare (Webster et al., 2018)—exposed to attack within the legal system, and face negative social and relational consequences. Some women are more likely to be subjected to sexual violence, more likely to have their complaints dismissed, and more likely to be socially ostracised for making a complaint. Trans women of colour living in Australia, from culturally and linguistically diverse (CALD) backgrounds, are one such group, but they are often overlooked in national statistics or research on sexual violence against women.

A NOTE ON TERMINOLOGY

Trans women depicted in this research used a range of terms to describe their gender identity, including "non-binary transfeminine", "genderfluid", "transgender female", "female", "sistergirl", "genderqueer", "woman", "trans woman" and "fa'afafine". While acknowledging this variation, this research uses the term "trans woman" which emerged as a generic term used to describe the participants' sense of community and commonality with others with a similar gender identity, and the term "women" when reporting findings. Sexual identity of research participants included straight (heterosexual), gay, lesbian, queer, bisexual, pansexual, asexual and fluid. For non-heterosexual identities, the research employs the term queer and the acronym LGBTIQ+ to refer to lesbian, gay, bisexual, transgender and queer communities. The research uses women of colour to refer to the ethnic identities of the trans women interviewed as it was preferred by participants. The term CALD is used to describe culturally and linguistically diverse backgrounds, and to distinguish between white, Anglo-Australians and culturally and linguistically diverse Australians.

Trans women experience higher rates of sexual violence than cisgender women

International research indicates trans women are at higher risk of sexual violence than cisgender women (James, 2016; National Coalition of Anti-Violence Programs, 2014, 2015, 2016). In Australia, a recent survey of trans and gender diverse people that asked participants “Have you ever been forced or frightened into doing something sexually that you did not want to do?” reported that 53.2 percent had experienced sexual violence compared to 13.3 percent of the broader Australian population (Callander et al., 2019). Trans women of colour face discrimination and violence on the basis of the intersection of their gender and racial identities and, for some, their sexual identities as queer women. However, there is an absence of Australian research investigating the experiences of sexual violence among trans women of colour.

The experiences and needs of trans women in relation to sexual violence remain poorly understood by many healthcare providers, legislators, police and policymakers, with the experiences and needs of trans women of colour from CALD backgrounds being the least understood. The absence of culturally competent information and knowledge about transgender experience, accompanied by misinformation, can lead to stigma, prejudice and discrimination, resulting in unmet needs for trans women. This can have serious consequences for trans women’s physical and psychological wellbeing. Trans women of colour from a CALD background, as well as women who identify as lesbian, bisexual or queer, may experience additional prejudice and discrimination, due to the intersection of gender, sexuality, race and religion.

THE ANROWS RESEARCH PROJECT

“Crossing the line: Lived experience of sexual violence among trans women of colour from culturally and linguistically diverse (CALD) backgrounds in Australia” by Professor Jane M. Ussher, Dr Alex Hawkey, Professor Janette Perz, Professor Pranee Liamputtong, Dr Brahmaputra Marjadi, Professor Virginia Schmied, Dr Tinashe Dune, Jessica Aasha Sekar, Samantha Ryan, Rosie Charter, Jack Thepsourinthone, Dr Kyja Noack-Lundberg and Dr Eloise Brook

The research was conducted by researchers based in the Translational Health Research Institute at Western Sydney University, with practice expertise provided by the Gender Centre. The project aim was to increase understanding of the lived experience of being a trans woman of colour living in Australia, in relation to gender transitioning and experiences of sexual violence. The project used a sequential mixed methods design and a feminist intersectional approach to address this aim. The research design, data collection and analysis, and outcomes from the findings were underpinned by principles of integrated knowledge translation, which included input from an advisory group and trans community stakeholders, integrating lived experience into the knowledge production and translation process.

Study methods included:

- thirty-one interviews with trans women of colour, and follow-up interviews with 19 women which included photovoice¹
- analysis of thirty-nine online forum threads, with 480 unique posters and 950 comments, in relation to discussion of trans sexual violence
- a national survey exploring sexual violence and women’s responses to violence that included:
 - trans women, i.e. assigned male at birth (n=180), 15 percent of whom were CALD
 - cisgender heterosexual women (n=1249), 8 percent of whom were CALD
 - cisgender lesbian, bisexual or queer women (n=866), 13 percent of whom were CALD.

Quotes appearing in this paper come from interviews and surveys with women carried out as part of the study, and also appear in the full report.

See anrows.org.au for the full report.

¹ Photovoice is an empowering qualitative method used in community participatory research, where participants are asked to express their points of view or represent their communities by photographing scenes that highlight their experience. The photos and accompanying narratives (which can be viewed in the full research report) aim to help policymakers and practitioners better understand trans women.

Key findings

Gender transitioning is a complex process

Thematic analysis of interview and photovoice data suggested that gender transitioning² is a complex process that takes place over time, with awareness of the desire to transition often starting in childhood or adolescence. While transitioning is not a linear process, all women described it as an experience of finding their true self, with positive consequences for health and wellbeing. Women described expression of their feminine or trans identity as a process of embodied agency, involving the adoption of feminine appearance, often accompanied by hormone therapy. Although expression of femininity often took a lot of labour, it was associated with pleasure and self-expression.

During the process of gender transition, many women experienced transphobic sexual harassment and assault, which they had not experienced previously. Passing as a woman resulted in social acceptance and reduced the risk of transphobic violence. However, some women found it difficult to pass if they did not meet narrow definitions of white hetero-femininity. Many women developed their own version of femininity, subverting the hetero-feminine beauty ideal, with some women making no attempt to pass. The intersection of femininity, cultural identity and sexual identity was often expressed through culturally specific clothes, jewellery or makeup.

Women who experienced support and acceptance of their feminine expression and identity from family, friends and work colleagues reported a positive experience of gender transitioning. However, many women described a difficult journey towards social acceptance, experiencing intersecting racism and transphobia in public, as well as within work spaces and the queer community. Rejection and attempts to prevent gender transitioning from family members was common. In combination, these sometimes led to women feeling isolated, invisible and unsupported.

Narratives from trans women in this research demonstrate the important role that family, partners, friends, healthcare professionals, the wider LGBTIQ+ community and the workplace all have on trans women's identity, sense of belonging and self-esteem. It reveals positive implications for women's overall health and wellbeing when women feel included and accepted.



Literally the experience was this, I went in. I sat down. I explained to her that I have been presenting female for a long time now. I'd like to go forward and start HRT [hormone replacement therapy]. And she was like, "Okay, cool. I'm not in a position to question your experience." That's a quote from her. And I was like, "That's really positive to hear. I think I'm in the right place."

(Dora)

² The term gender affirmation is increasingly being used in place of gender transition. As the participants in this study described a process of gender transition, this is the term the research has employed.

Experiences of migration can intersect with sexual violence

Sexual violence often commenced in childhood and, for some trans women, motivated them to migrate.

Many trans women of colour seek to leave their country of origin to escape violence, persecution, family abuse or rejection, and economic disadvantage related specifically to their gender identity (Alessi, Kahn, Woolner, & Van Der Horn, 2018). Some trans women also report migrating in order to access better healthcare, education and employment, and to experience gender affirmation without fear of violence (Cerezo, Morales, Quintero, & Rothman, 2014; Munro et al., 2013). For some interview subjects, migration facilitated publicly transitioning, particularly for women who came from countries where being gender diverse or transgender was not accepted.



In Argentina ... I didn't have the courage to come out because I was in a really violent household ... So I think I had it in me that I couldn't come out like I was lost. So to me, going to Australia, was the exit, like the paradise, freedom, you know what I mean?

(Sofia)

Across all studies examined in this research, there was acknowledgement of the lack of migration services that are both trans *and* culturally competent. As a result, many trans women of colour feel locked out of broader migrant services due to perceptions of transphobia in the broader migrant community. Trans women who are migrants or refugees may be let down by immigration services, and encounter barriers additional to those already experienced by cisgender migrant and refugee women (see also Vaughan et al., 2016).

Sexual violence is a common experience for trans women of colour

The interview, online forum and survey data all demonstrated that sexual violence is a common experience for trans women. This included both sexual harassment and sexual assault, occurring in both the public and private domains. Trans women of colour reported similar experiences to trans women from non-CALD backgrounds, exacerbated by racism within both society at large and queer communities (Cyrus, 2017; Giwa & Greensmith, 2012). Notions of a broad and supportive LGBTIQ+ community may therefore have little meaning for trans women of colour.



Queers don't organise violent gangs to go round bashing people, but they do exclude people from communities which results in the death of people who don't—who no longer have access to their social networks or they feel like they can't rely on their community.

(Dinaz)

Sexual harassment

Sexual harassment that served to cross people's boundaries included trans women being objectified and positioned as other, being stared at, or having their gender commented upon in the public domain. This often resulted in women being hypersexualised or outed as trans or as a man, which could lead to social exclusion, or a situation of danger for the woman. Many women were deliberately misgendered in their interactions with others, or were subjected to transphobic and derogatory comments, including being mocked, insulted, laughed at, and threatened with physical or sexual violence. The intersection of gender, cultural identity, and sexual identity was evident in accounts of combined sexism, racism, homophobia and transphobia, sometimes from strangers, and sometimes within the queer community.

Sometimes women were uncertain as to whether verbal harassment was directed at them as women, experiencing "catcalling" similar to that reported by cisgender women, or was transphobic abuse because they were trans women who don't pass as women. The fear of being murdered was shared by many trans women, who described feeling anxious about presenting as a woman in a social context. Catcalling could be a confidence booster for some trans women, however it also has a dangerous undercurrent.



For me, one of the most common and, like, ignored sexual violence is catcalling, because it's not just guys telling you, "Hey beautiful", "Hey this, hey that", or calling you names, or saying sexual stuff to you. It's the feeling that you get when guys actually do that because for me as a trans woman, I feel like if the guy is trying to hit on me and if they found out later on that I'm trans, they're going to be mad at me and my life is going to be in danger.

(Jennifer)

The pervasiveness of verbal violence in the lives of trans women meant there were very few places where the women were safe from abuse.

Sexual assault

Physical and sexual assault which served to cross bodily boundaries included women being beaten up, spat upon, and groped, as well as subjected to online violence and forced sex/rape, usually in the public domain. There were also accounts of violence and sexual assault in the context of the family when women were younger; when dating new partners, where fetishisation can also occur; and within intimate relationships. Complexities surrounding disclosure of trans identity when beginning an intimate relationship with a cisgender man were associated with risk of violence.



I think because a lot of people do want to hurt us ... they feel guilty about finding us hot, they want to have sex with us but then they also have a lot of internalised homophobia, transphobia, a lot of cis straight dudes find trans women hot, and then they get the gay fear when they are engaged in sex.

(Dinaz)

Some women worked as sex workers, one of the few occupations open to them, and reported experiencing sexual violence from clients, reflecting earlier research by Fletcher (2013). Trans women who were sex workers were more vulnerable in contexts where sex work is criminalised or has implemented a licensing system, such as Queensland.

Sexual coercion

The research highlighted unrealistic sexual expectations that cisgender men have of trans women, often associated with fetishisation. As one community stakeholder explained: “There is a huge rift between how trans bodies function and how trans women experience pleasure and how they are depicted in pornography.” Frequently trans women described having limited agency and being coerced into sexual acts by boyfriends. For example, Dinaz said they³ had a boyfriend who “would just always pressure me into doing things that I didn’t really want to do ... that were painful, which I’m not really into or ... engage in risky sex”.

Responses to sexual violence: Self-protection, resilience and agency

In the interviews, sexual violence was found to have negative impacts on trans women of colour, including fear, anxiety, depression, self-harm and self-blame. However, the women adopted a range of responses and strategies for coping with the threat of sexual violence, as well as for dealing with the consequences of sexual violence that has occurred, demonstrating agency and resilience.

In terms of confidence, even if it’s a false sense of confidence ... if I’m walking down the street and people are staring ... or whatever sometimes, I will literally either look at them death glare, then being like “Don’t fuck with me”.

(Sam)

Some women adopted a psychological strategy of rationalisation and normalisation of violence as a means of defence against the psychological impact of abuse. For other trans women, choosing to view the sexual harassment directed at them as stemming from them passing as cisgender women meant it could serve to be gender affirming. Behavioural responses to violence included hypervigilance in the public sphere, not going out in public, and the avoidance of intimate relationships.

I have learnt to move around the world as a minority person and now as a woman, keeping myself small and quiet and so on, that’s the way I avoid [sexual violence] as much as possible.

(Emma)

Women also adopted a range of positive strategies to make meaning of their experiences and to facilitate coping, further demonstrating agency and resilience. These included naming sexual violence, seeking out the positives in their experiences, self-acceptance,

³ Participant’s preferred pronoun.

prioritising the self, talking about sexual violence, and seeking support from health care professionals and the police.

Trans women of colour need support to address sexual violence in their lives

Taking agency to actively seek support from others in response to sexual violence was important for many women. Drawing on interviews, this research found that trans women of colour sought support from informal support networks including friends, family members and other members of the transgender community, both face to face and online. When support was not provided from these informal networks, women described ongoing psychological distress and isolation.

Support from healthcare professionals can be central to resilience and survival following sexual violence. Support in gender transitioning, through facilitation of access to hormone therapy, reduced the risk of transphobic violence. Women described positive support following experiences of sexual violence from GPs, clinic nurses, psychologists and psychiatrists, LGBTIQ+ community support workers and physiotherapists. This support served to alleviate distress and facilitate coping and resilience. Being accepted as a trans woman was a key element to this support, with women's chosen names being used, not their previous "dead names".



I really appreciated that the person who collected my blood was very knowledgeable. I guess "woke" [culturally competent] for lack of better word and just knew what to do and how to reconcile the records with my current details and so on, and didn't make a big deal of it.

(Elizabeth)

Some of the women described negative experiences associated with seeking support from healthcare professionals following sexual violence, with individuals and services being described as transphobic or disrespectful to trans women of colour. As a result, many women felt that formal support after sexual assault that was available to cisgender women was not accessible or adequate for addressing their concerns and needs.



[I] cannot access women's sexual assault services because I'm transgender. And the other straight women will be afraid that I'm a perpetrator.

(Fiona)

Negative experiences with police and the legal system were also experienced by many of the participants in this study, who reported feelings of judgement, blame, mistrust and a lack of acknowledgment that sexual violence had occurred. A lack of formal response in collecting DNA or other samples after sexual assault was also reported by some of the women in this study, which they attributed to being trans women of colour, or a sex

worker. At the same time, experiences of violence from police were reported by some of the participants, including physical violence and sexual harassment, revealing a strained relationship between trans women of colour and the police.



I'd never look at a police officer and feel safe, never will.

(Amanda)

Sexual violence is an issue for all women

Experiences of sexual violence of CALD trans women are comparable with those of non-CALD trans women and cisgender women. The comparative survey component of this research invited women who had experienced sexual violence to describe the nature of their experiences. With the online survey accessed by 2663 people, even after eliminating ineligible respondents (for example, people assigned male at birth, who identified as male), the final sample size was significant: 2295 people with a completion rate of 86 percent. Trans women represented 7.9 percent of the sample, and were further categorised into non-CALD (6.7% of total sample) and CALD (1.2%) groups. The smaller sample size of CALD trans women is perhaps owing to the survey being only conducted online (rather than orally) in English.

The overwhelming majority of respondents indicated that they had experienced sexual harassment and over two thirds of respondents reported that they had experienced a sexual assault since the age of 16, including trans women and cisgender women, across sexual identities and cultural backgrounds.

Sexual harassment

The majority of women reported that they had experienced sexual harassment on multiple occasions. CALD trans women reported more frequent sexual harassment than other women. Strangers were the most common perpetrators of sexual harassment for all women, with CALD trans women reporting the highest rate of sexual harassment by a stranger compared to other groups of women. CALD trans women were also more likely to report being harassed outside the home or in public spaces than other women.

Sexual assault

While half of the CALD trans women who responded to the survey reported having experienced sexual assault since the age of 16, this was lower than it was in the proportion of women who did not identify as CALD or were cisgender women. The majority of women who reported sexual assault had experienced it more than once, however CALD trans women were found to be twice as likely as other groups of women to report having been sexually assaulted 10 or more times. CALD trans women were also more likely to report having been assaulted by a stranger and more likely to report being assaulted both outside and in the home, compared to other women.

The majority of women across groups reported that self-support was their primary mode of coping with sexual harassment or assault, with self-support highest in CALD trans women. CALD trans women were more likely to report no support compared to other groups of women. No trans women reported support from police or justice agencies. Friends were the greatest source of support for all women.

The majority of women reported having made changes to their day to day lives as a result of experiencing sexual harassment or sexual assault. This included being hypervigilant; avoiding men; avoiding sex and intimacy; avoiding going out in public, particularly at night; modifying their appearance; and learning self-defence. The majority of women also reported negative impacts of sexual harassment and assault, including psychological and physical consequences.



Gabriella, *Selfie with bun*

Implications for policymakers

All Australians need to challenge societal attitudes that support, condone or trivialise sexual violence against women, including trans women.

Building upon existing LGBTIQ+ health strategies across the majority of Australian states and territories, this research makes the following recommendations:

- Conduct community-wide, multi-faceted sexual violence prevention activities to encourage cultural change across all communities, promoting respect for gender, sexuality and cultural diversity, with zero tolerance to sexual violence for all women.
- Challenge societal attitudes which support, condone or trivialise sexual violence against women, including violence against trans women.
- Educate healthcare providers, legislators, police and policymakers, as well as the general public, to increase knowledge about transgender experience and gender transitioning.
- Enhance programs of sex education within school settings to include components on healthy relationships and sexual violence, which are inclusive of gender and sexuality diversity.
- Train those working to prevent sexual violence against women, and those providing support to women subjected to sexual violence, to be aware of and responsive to the needs and experiences of gender diverse women, including trans women of colour and those who are sexuality diverse.
- Ensure policy and practice documents and clinical guidelines use language that is inclusive of gender and sexuality diversity when discussing sexual violence against women. This means being inclusive of transgender and non-binary gender identities, as well as queer identities.
- Ensure healthcare providers, legislators, police and policymakers are knowledgeable about the implications of the intersection of gender, sexuality, race, and other categories of difference (such as age, social class and religion) in the experiences of sexual violence for trans women of colour from a CALD background.
- Provide additional support for trans women of colour who have experienced sexual violence to report incidents of sexual violence to the police, and to navigate court processes.
- Recognise the vulnerability and needs of trans women who are sex workers when addressing sexual violence, including violence prevention, police response and support for women. As a first step, fully decriminalise sex work in every Australian state and territory.
- Properly resource future research to include community interviewers in a range of languages, and surveys translated into the first language of participants which are administered orally, so that the experiences and impact of sexual violence for trans women who do not speak English can be collected.

Implications for practitioners and service providers

This research project has produced a practice guide for practitioners and service providers that can be found at www.anrows.org.au, on the project page.

Sexual violence prevention and support services

Ensure services to support women who have experienced sexual violence, and information about services providing such support, are accessible, visible and inclusive to trans women and those who are sexuality diverse, with attention paid to the needs of trans women of colour from CALD backgrounds. This includes:

- reviewing intake and other forms so that they are inclusive of gender, sexuality and race
- training staff about gender and sexuality diversity, how to use gender neutral pronouns, and how not to misgender people, and building confidence about how to handle misgendering someone
- reviewing broader service aims/models of care to consider whether or not the service is or can be inclusive of trans women, and then taking steps to operationalise the outcome of the review.

Sexual violence prevention and support programs need to engage with, and be co-designed by, multicultural women's services and LGBTIQ+ services as well as women leaders from CALD and queer communities. Inner City Legal Centre (ICLC) in New South Wales provides a working example of this model with their free, statewide, specialist legal service for transgender people. Operating since 2018, this service is guided by an advisory committee of trans people and transgender organisations. Service provision includes working with interpreters when required by clients with a CALD background. The ICLC also runs a sex worker-specific legal service conducted in partnership with the Sex Workers Outreach Project (SWOP) that facilitates access to justice for transgender sex workers.

Migrant services

Ensure that migrant services are accessible, visible and inclusive to trans women and those who are sexuality diverse. This might include signage that indicates trans people are welcome, reviewing forms to make them inclusive of gender and sexuality, and providing staff with training on gender and sexuality diversity including appropriate use of preferred pronouns.

Healthcare and general practitioners

Provide trans affirmative care, including use of correct pronouns, staff trained in cultural safety, non-gendered bathroom facilities, and trans and gender diverse-specific literature and health resources. Support gender transitioning and, through the facilitation of access to hormone therapy, reduce the risk of transphobic violence.

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Further reading

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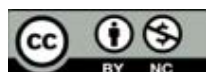
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to Reduce Violence against Women & their Children

