Rural spaces are filled with diversity. This diversity gives vibrancy and opportunity to our rural communities. It also brings new challenges for dual/multi-service advocacy agencies trying to provide services to an ever-growing range of sexual violence survivors. Part of our rural diversity comes from our lesbian, gay, bisexual, transgender, and queer (LGBTQ) neighbors.

Many studies estimate that LGBTQ people experience sexual violence at higher rates than their heterosexual and non-transgender counterparts. According to the National Intimate Partner and Sexual Violence Survey, 44% of lesbian women and 61% of bisexual women experience sexual violence in their lifetime. This same survey found that 26% of gay men and 37% of bisexual men experience sexual violence in their lifetime (NISVS, 2011). Sexual violence experienced by LGBTQ people is perpetrated by family, friends, partners, acquaintances, and strangers. It is sometimes used to oppress those who challenge gender roles, and just like heterosexual victims, to assert power and control. In a 2011 study conducted by the National Coalition of Anti-Violence Programs (NCAVP), 85% of hate crime victims identified as queer or questioning and 20% identified as transgender or gender non-conforming.

In enhancing our services for LGBTQ survivors, it is important first to understand the many identities present within the community. LGBTQ communities include a wide variety of sexual orientations and gender identities. For your ease, some of these identities include...
will be defined here (see the definitions and resources for more). It is important to remember that survivors have personal definitions and these are influenced by personal, cultural, and societal factors. However, to start the conversation it is helpful for us to have a basic understanding of commonly used terms.

All of the terms used in this paper refer to either a person’s sexual orientation or gender identity. Sexual orientation refers to a person’s sexual or romantic interest. For example, the terms lesbian and gay refer to people who have sexual and romantic attraction to those of the same sex. Gender identity refers to how a person feels or expresses their gender. For example, the term transgender refers to a person who does not identify with the gender assigned to them at birth. Another way to think of this is a person who did not identify with the gender marker F or M that was written on their birth certificate. Gender non-conforming is a term for a person who does not follow stereotypical ideas about how they should look or act based on the gender they were assigned at birth. Queer is a term often used by younger members of the community, urban populations, activists, and academics to broadly refer to a person’s sexual orientation or gender identity, or to the community as a whole. The term queer has historically been used as an offensive term, but in recent decades has been reclaimed by many members of the LGBTQ community. However, the term queer is still sometimes used as hate speech, and should only be used when you have a good understanding of and relationship with the community.

In the United States, the common words we use to describe sexual orientations and gender identity tend to reflect white culture. However, other cultures and parts of the world think of sexual orientation and gender identity in other ways and use different words. For example, two-spirit is a term traditionally used by some Native American tribes to recognize individuals who possess qualities or fulfill roles of both genders. Another example, Māhū, is a term traditionally used by Native Hawaiians to recognize people who possess qualities which represent both genders. Same-gender loving is a term used in African American communities as a more culturally affirming term for gay, lesbian, or bisexual identity. As with any of these terms, it is best practice to ask survivors how they identify and respect their choices. To find detailed definitions of commonly used LGBTQ terms, please see the attached list.

For many in the LGBTQ community, no space is safe. Creating emotionally and physically safe spaces for survivors to speak about their victimization and their identities is imperative to healing. While almost every member of the LGBTQ community has experienced discrimination at some point, people of color and transgender people experience it at elevated rates. According to the NCAVP, 80% of LGBTQ homicide victims in 2014 were people of color (2015). According to this
same report, hate-motivated violence against transgender people in 2014 rose 13% over previous years.

A study on violence committed against transgender and gender non-conforming people (Grant et al., 2011) found that harassment was experienced during grades K-12 (78%), while at work (90%), while trying to access homeless shelters (55%), while in jail or prison (16%), and even at the hands of police officers (22%).

LGBTQ teens are another vulnerable population for violence and abuse. Bullying, homelessness, and suicide rates are exponentially higher for LGBTQ teens. According to a recent report, over 55% of LGBTQ students feel unsafe at school because they fear homophobic violence and 37.8% because they fear transphobic violence (Kosciw, Greytak, Palmer, & Boesen, 2014). Approximately 40% of the youth homeless population identifies as LGBTQ (Durso & Gates, 2012). According to the CDC, lesbian and gay youth are four times more likely to attempt suicide as their straight peers and a quarter of transgender teens have attempted suicide (2011).

Recently, there have been many hopeful changes in federal policy, local community resources, and popular culture such as the Supreme Court’s decision to strike down state bans on same-sex marriage and inclusion of LGBTQ characters in television shows. However, the LGBTQ community still faces discrimination, bias, and violence on a daily basis, and lack legal protection from discrimination in many states. For a map of

History of Oppression and Violence

It is helpful to understand the historical oppression of LGBTQ people, as it still affects our advocacy and the community response to LGBTQ survivors. LGBTQ people have existed throughout history. The term *homosexual* was first used in the 1800’s to describe people who engage in same-sex sexual acts. Quickly, the term became shorthand for sexually deviant behavior and criminal sex acts, and implied mental illness. Homosexuality was treated as a sickness with a variety of inhumane “cures” including castration, electroshock therapy, lobotomies, and being committed to an asylum. Homosexuality was listed as a mental illness in the main reference guide for therapists and physicians, the Diagnostic and Statistical Manual, until it was finally removed in 1973. As a result, the term homosexual has a negative and clinical connotation that most members of the LGBTQ community today do not identify with.

From the 1900’s through today, the LGBTQ community experienced religious, employment, and housing discrimination as well as police brutality. This persecution and violence was deeply rooted in homophobia and transphobia. *Homophobia* is the fear, discomfort, intolerance, or hatred of homosexuality or same-sex attraction. *Transphobia* is the fear, discomfort, intolerance, or hatred of transgender and gender nonconforming people. Displays of homophobia and transphobia include hate crimes, denial of services, offensive or disparaging comments and jokes, and institutional oppression.

Being an Ally

Acting as an ally to the LGBTQ community is an important early step in reaching the community in your area. Being an ally simply means you support social equality of a marginalized group you are not a part of. The most important parts of being an ally are education, cultural humility, and using your privilege to help. First, seek out education on the privilege heterosexuals and non-transgender people have. For example, find out what laws in your state impact housing and employment discrimination for LGBTQ people. Next, remember that no matter how much education you or your agency receives, it is important to recognize the limitations of this education. Learning cultural humility means being willing to listen and trust those who experience discrimination and oppression. Lastly, use your privilege to educate others in your community. This will create more safe spaces for LGBTQ people in your community and will strengthen existing partnerships. A simple way to be an ally is to include LGBTQ people in your agency as board members, staff, and volunteers. Acting as an ally shows LGBTQ survivors that your agency is a safe space and models allyship for other members of your community. For more information on allyship, check out http://hrc-assets.s3website-us-east-1.amazonaws.com/files/assets/resources/Allys-Guide-Issues-Facing-LGBT-Americans-Dec2012.pdf and https://community.pflag.org/document.doc?id=139.

Training

Prior to any targeted outreach to the LGBTQ community, our agencies should provide all
staff, volunteers, and board members with training specifically related to supporting the LGBTQ community. It is also important to create a culture which encourages staff to examine their own beliefs about gender and sexual violence. Gendered violence is more complex than simply violence against women. It disproportionately affects transgender people, including those who currently or in the past have been perceived as male. The process of examining our views on gender and recognizing our limitations can stir up scary feelings. However, our services are influenced by our views on gender so we need to take the time to analyze our biases before we serve sexual violence survivors.

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LGBTQ survivors face the same effects of sexual violence as heterosexual and non-transgender survivors. However, LGBTQ survivors also cope with fear of being outed, discrimination, and un-trained and insensitive staff when they try to seek support. The NCAVP conducted a survey of community-based programs and victim assistance providers and found that nearly 70% had not received training on issues related to lesbian, gay, and bisexual people (2010). Even more alarming, the survey found that over 90% had not received training on issues related to transgender people (NCAVP, 2010). Before LGBTQ survivors walk in our doors we need to proactively reach out to receive training and continued education. Receiving training on LGBTQ issues creates confident and responsive staff who are better equipped to assist sexual violence survivors. Reach out to your state/territory coalition to find state-/territory-specific LGBTQ sexual violence training, or some of the national training resources noted at the end of this paper.

As our agencies continue to gather knowledge about the LGBTQ community, we must also learn how to address anti-LGBTQ remarks made by community members, systems partners, survivors, or our own staff and volunteers. It is important to respond to hurtful or disparaging remarks when they arise. For a helpful guide on confronting anti-LGBTQ remarks, see http://forge-forward.org/wp-content/docs/confronting-client-bias.pdf.
Outreach to LGBTQ Communities

As we begin our targeted outreach to LGBTQ survivors we should be creating and strengthening our relationships with LGBTQ-friendly service providers and programs. Rural communities may have few LGBTQ-specific spaces, but that doesn’t mean there are no LGBTQ-friendly spaces.

If your community does not have an LGBTQ-specific community program, search out allied and friendly programs, such as faith leaders, that assist with medical, housing, food, social support, and other basic necessities. Partnering with an LGBTQ student group at a high school, community college, or university is often a good way to build relationships with the larger LGBTQ community. With an LGBTQ-specific agency or with other LGBTQ-friendly service providers, a great way to strengthen a local partnership is to offer cross training. Your agency can provide a strong foundational training on sexual violence and the partnering agency can train staff and volunteers on issues related to LGBTQ people.

It is common for rural LGBTQ people to travel great distances to a city or larger town to access LGBTQ-friendly services, attend Pride events, and gather in exclusively LGBTQ spaces. Consider traveling outside of your service area to provide outreach to members of your rural community. There may be an LGBTQ organization based in the closest city to your program. These programs will be able to help connect survivors to your agency as well as provide training on issues related to LGBTQ identities. Form partnerships with LGBTQ-friendly service providers, attend LGBTQ events, and distribute flyers, brochures, and other contact information. We can also partner with programs that may not have a daily presence in your rural community, but support LGBTQ people across the state/territory, such as a state-wide LGBTQ equality program.

Rural communities sometimes lack LGBTQ-friendly spaces, resources, and information on the spectrum of identities. This has historically contributed to a disconnect between rural LGBTQ people and the larger queer culture around the country. In recent years, the shifting political landscape and online resources have increased access for rural LGBTQ people to find community and information wherever they live. The enormous number of social media sites, LGBTQ-friendly programs with an online presence, and digital social networks has created an online safe space to connect. Rural LGBTQ people, especially teens, often use the internet to find information, support, friendships, and romantic relationships. Therefore, our outreach to LGBTQ sexual violence survivors needs to include an online presence.

Providing outreach means connecting with our rural community in a wide variety of settings. As we speak with service providers, community members, and students, we don’t know who identifies as part of the LGBTQ community. Every presentation, speaking engagement, educational session, and training should highlight our welcoming attitude to all people and the privacy and confidentiality that all survivors receive when seeking our services.

Members of the LGBTQ communities are often concerned with who has access to information about their identities. *Outing* a person, which is revealing the sexual orientation or gender identity of a person without their permission,
can threaten a person’s physical and emotional safety. To gain the trust of LGBTQ survivors we need to let them know what they can expect from our services in regards to confidentiality and privacy.

When creating outreach materials make sure to be inclusive of LGBTQ people. If your agency has a gendered name, consider renaming it. When an agency has “women” in their title, it often creates barriers for those who do not identify as women or who may worry that you won’t consider them a woman. Include common LGBTQ symbols or images of same-sex couples and transgender people of a variety of ethnicities and physical abilities (see above). Highlight that your agency is a LGBTQ-friendly space that provides services for all sexual violence survivors. Use a definition of sexual violence that is inclusive of all genders or is gender-neutral.

Creating Safe and Inclusive Spaces
Providing a space of healing for LGBTQ sexual violence survivors means making our spaces feel inclusive and comfortable. In our office spaces we should hang posters and artwork and display resources which represent the diversity that exists in our communities. Clearly display your agency’s

Left to right (clockwise): The rainbow flag is a symbol of LGBTQ pride and LGBTQ social movements, meant to represent the diversity of LGBTQ people around the world. The pink triangle was a symbol the Nazis forced gay men to wear during World War II to publicly shame them. In recent decades, the pink triangle has been reclaimed by the gay community and used by some as symbol of pride. The Greek letter lambda was used during the early years of the Gay Rights Movement, which signifies unity under oppression. A transgender symbol (one of many) depicts a circle with an arrow projecting from the top-right (the male symbol), and a cross projecting from the bottom (the female symbol) with a struck arrow that combines the female cross and male arrow projecting from the top-left. Please note that the list of LGBTQ friendly symbols is not limited to the ones shown above.
nondiscrimination policy in the lobby or another prominent area.

We should provide a gender-neutral bathroom space as an option for survivors. A gender-neutral bathroom is a bathroom that people of any gender identity can use. An easy way to create a gender-neutral bathroom is to simply hang a sign on a one-stall bathroom in your building that says “All Gender Restroom.” Creating a gender-neutral bathroom may require some education for the other survivors who access our services. This provides the opportunity to display our allyship and to educate more members of our rural community.


Communication
Displaying visible signs of inclusion is just the first step in creating a safe space for LGBTQ sexual violence survivors. We also need our language, behavior, and agency processes to be inclusive.

As we speak with LGBTQ survivors, mirror the language they use to speak about their life, identity, partners, and other support people in their life. Until a survivor informs us otherwise, use a gender-neutral word like “partner” instead of a gendered word like “boyfriend.” LGBTQ people have personal definitions for terms and identities so we can’t use one set of definitions and assume they will work for everyone’s life. This is especially true when working with survivors in medical settings. Respectfully ask what body names the survivor would be most comfortable using and hearing when talking about their body or the sexual violence they experienced. For example, a transgender or gender non-conforming survivor may be more comfortable using the word “chest” instead of “breasts.” When getting to know survivors we should ask broad, open-ended questions and never make assumptions about the answers. Only ask respectful follow-up questions when necessary to providing services, and never out of curiosity.

When we first meet survivors, we should find out their preferred name and gender pronouns. Transgender and gender non-conforming survivors often have a preferred name that is different than the name they were given at birth. Medical and legal systems may need to use a survivor’s legal name at some point, but this shouldn’t affect our use of the survivor’s preferred name. Using their preferred name is the most basic way we can show respect for their identity.
name that is different than the name they were given at birth. Medical and legal systems may need to use a survivor’s legal name at some point, but this shouldn’t affect our use of the survivor’s preferred name. Using their preferred name is the most basic way we can show respect for their identity.

Another way we show respect is to ask survivors their gender pronouns. Examples of gender pronouns are she/her/hers and he/him/his. Some people prefer to use gender neutral pronouns like they/them/theirs or ze/hir/hirs. To ask someone their pronouns you can simply say, “I use the feminine pronouns she and her, what pronouns do you use?” Not everyone knows what gender pronouns are, but that doesn’t mean they don’t have a preference. Another way to ask someone their pronouns is to ask, “What do you like to be referred to by others? Some people use she or he or they...”. It may also be necessary to find out in which spaces they prefer which pronouns. Some transgender or gender non-conforming people find it safer to use the pronouns assigned to them at birth in public spaces. For more information on how to use pronouns, look at https://uwm.edu/lgbtrc/support/gender-pronouns/ and http://forge-forward.org/wp-content/docs/FAQ-Pronouns.pdf.

Whenever possible we should remove questions about gender identity from report forms. When questions about sex and gender are required from our funders, be sure to make the options as inclusive as possible. Some funders may allow only male or female, in which case we need to explain the limitations to survivors. You can find examples of LGBTQ inclusive forms and a list
of sample questions at http://www.glma.org/_data/n_0001/resources/live/GLMA%20guidelines%202006%20FINAL.pdf.

Advocacy Needs of LGBTQ Survivors

The LGBTQ community within any rural community is very small. Typically everyone knows everyone and information spreads quickly. Some LGBTQ survivors may prefer to get services from a LGBTQ-specific program or another sexual assault program that is in a different part of the state, simply to have more privacy and confidentiality. You may want to speak with the nearest LGBTQ-specific program to ask how large their service area is and whether they can provide any services outside of their area. For survivors who would like to receive local services, ask them about specific privacy concerns and brainstorm potential solutions. For example, if the survivor is nervous about being seen entering your agency, the advocate can meet the survivor in their home or another community agency. Often survivors will be content with simply understanding who has access to their information. So make sure to let survivors know who has access to their file and who at your agency you need to discuss their case with.

Working with LGBTQ survivors in accessing criminal or civil justice systems, medical systems, or other service providers requires responsive and thoughtful advocacy. The other systems we engage with in our rural communities often haven’t done the same introspective work on gendered violence, homophobia and transphobia, and privilege. Offering training, dialogue, and resources can be a helpful place to start. However, in the meantime survivors still need to access these systems.

Find which systems and programs in your rural community are safe places—ones that will not shame, harass, or bully a person for being LGBTQ—for help in your rural community. Sometimes this means learning which person is safe and helpful, even if you find the program as a whole is not. Be sure to speak with LGBTQ survivors to help determine which community resources feel safe. When referring LGBTQ survivors to other systems or service providers, give as much information as you can about what the experience may be like. Sometimes, to meet their needs, survivors have to access unfriendly services in our communities. Some survivors may choose to stay closeted for these interactions as a form of self-protection. Help the survivor anticipate and plan for possible responses from these systems so they can decide for themselves if that is a resource they want to access.

When advocating for LGBTQ sexual violence survivors in our rural communities, be sensitive to the specific needs of this community. Many LGBTQ survivors anticipate mistreatment by law enforcement and medical providers. Whenever possible, advocates should accompany LGBTQ survivors during encounters with law enforcement officers, medical providers, and other service providers to provide advocacy and support. During emergency medical care or evidence collection, advocates can assist by explaining why the examiner is asking certain questions or examining certain parts of the body. Friends or family who accompany the survivor to medical exams or criminal justice appointments may not be aware of the survivor’s LGBTQ identity. It is important to
privately ask the survivor what information can be discussed openly in front of support people. Remember, a survivor’s sexual orientation or gender identity may not be relevant to the assault or the services they receive.

Learning about oppression of LGBTQ people, building our allyship, devoting attention to our outreach strategies, and enhancing our communication and advocacy skills will help us best serve LGBTQ communities. Serving LGBTQ sexual violence survivors in our rural communities strengthens our community connections and builds our own knowledge. It gives us the opportunity to evaluate the way our services are structured and how we view our work to erase gender-based violence.

Ultimately, the effort we put forward celebrates the diversity present in our communities and assists us in creating safety, comfort, and healing for all survivors in our communities.
LGBTQ Terminology

LGBPTQIA+: a combination of letters trying to represent identities in the queer community. This version represents Lesbian, Gay, Bisexual, Pansexual, Transgender, Queer, Questioning, Intersex, and Asexual.

Ally: a person who actively works to end intolerance, educate others, and support the social equality of a marginalized group they are not a part of. Example: a straight person who is an ally to the LGBTQ community.

Androgyny: a gender expression that has elements of both masculinity and femininity.

Asexual: a person who generally does not feel sexual attraction to any group of people. Asexuality is a sexual orientation and differs from celibacy or sexual abstinence, which are behaviors.

Biological Sex: the physical anatomy and gendered hormones a person is born with. Words that describe sex are male, female, and intersex. Example: someone who is biologically female typically has XX chromosomes, minimal body hair, and a vagina.

Bisexual: a person who has sexual and romantic attractions to both men and women.

Cisgender: a person who identifies with the gender assigned to them at birth. Also referred to as not transgender. Example: a biological female who identifies as a woman.

Cis-sexism: behavior and policies that grant special treatment to cisgender people, reinforces the idea that being cisgender is somehow better or more “right” than being transgender, or ignores transgender people. Example: Forms that ask for gender only give two options, male and female.

Closeted: a person who is keeping their sexuality or gender identity a secret and has yet to “come out of the closet.”

Coming out: the process of discovering for yourself and letting people know your sexual orientation or gender identity. Coming out is often thought to be a one-time event, however this is a lifelong and sometimes daily process.

Cross-dressing: wearing clothing that conflicts with the traditional gender expression of your biological sex and gender identity. Cross-dressing happens for a number of reasons including relaxation, fun, or sexual gratification and should not be confused with being transgender or gay. Example: a man wearing women’s underwear.

Drag King: a person, typically a woman, who dresses in an exaggerated masculine style and personifies male gender stereotypes as part of an individual or group routine for public entertainment. Performing drag should not be confused with being transgender or gay.
Drag Queen: a person, typically a man, who dresses in an exaggerated feminine style and personifies female gender stereotypes as part of an individual or group routine for public entertainment. Performing drag should not be confused with being transgender or gay.

Dyke: an offensive slang term used for lesbian women. This term has been reclaimed by some lesbian women as a symbol of pride but should not be used by those outside the community.

Faggot: an offensive slang term used for gay men. This term has been reclaimed by some gay men as a symbol of pride but should not be used by those outside the community.

Female: the biological sex of a person with a specific set of sexual anatomy. Typically a female has XX chromosomes, a vagina, ovaries, a uterus, breasts, higher levels of estrogen and minimal body hair.

Fluid: generally this term is used with other terms attached, like gender-fluid or fluid-sexuality. Fluid describes an identity that is a shifting mix of the options available. Example: someone who identifies as gender-fluid may wear stereotypically feminine, masculine, and androgynous outfits.

FTM: a medical term used to describe a transgender man. It stands for Female to Male.

Gay: a man who has sexual and romantic attractions to men. This term is also sometimes used for all people who have same-sex attraction.

Gender: Socially constructed attitudes, characteristics, and behaviors assigned to a person’s biological sex. Some words that describe gender are man, woman, and transgender.

Gender affirmation surgery: surgical procedures that change a transgender person’s body to conform to their gender identity. The minority of transgender people choose to and can afford to have these surgeries. Outdated and inaccurate terms for this include: sex change operation, gender reassignment surgery, and sex reassignment surgery.

Gender binary: a traditional and outdated view of gender which limits gender possibilities to only “man” and “woman.” This view of gender leaves out the possibility of transgender and gender-nonconforming people.

Gender Expression: the outward expression of gender identity, typically displayed through a combination of dress, demeanor, and social behavior.

Gender Identity: how a person feels or expresses their gender. Examples: man, woman, genderqueer.

Gender-nonconforming: a person who does not follow stereotypical ideas about how they should look or act based on the gender they were assigned at birth.
**LGBTQ Terminology**

**Genderqueer**: a person who doesn’t identify as either male or female, but rather something outside the traditional binary gender system.

**Hermaphrodite**: an outdated and offensive medical term used to describe someone who is intersex.

**Heterosexism**: behavior and policies that grant special treatment to heterosexual people, reinforces the idea that heterosexuality is somehow better or more “right” than queerness, or ignores queerness. Example: a sexually active woman is assumed by health care providers to be heterosexual and in need of information on birth control.

**Heterosexual**: a person who is attracted to someone of a different gender. Also referred to as straight.

**Homophobia**: the fear, discomfort, intolerance, or hatred of homosexuality or same-sex attraction.

**Homosexual**: a person who is attracted to someone with the same gender. This term is considered offensive and stigmatizing by many members of the community.

**Intersex**: a person with a set of sexual anatomy that doesn’t fit within the labels of female or male. Example: a person with XXY chromosomes or someone with both a uterus and a penis. Many people born intersex are assigned a gender at birth and given surgeries in infancy and childhood.

**Lesbian**: a woman who has sexual and romantic attractions to women.

**Male**: the biological sex of a person with a specific set of sexual anatomy. Typically a male has XY chromosomes, a penis, testis, facial hair, higher levels of testosterone, and coarse body hair.

**MTF**: a medical term used to describe a transgender woman. It stands for Male to Female.

**Outing**: revealing the sexual or gender orientation of a person without their permission.

**Pansexual**: a person who experiences sexual and romantic attraction for members of all gender identities and expressions.

**Gender pronouns**: the set of pronouns a person would like others to use when talking to or about that person. Example: she/her/hers or they/them/theirs

**Queer**: a term often used by younger members of the community, urban populations, activists, and academics to broadly refer to either a person’s gender or sexual orientation or the community as a whole. This term was historically offensive but has been reclaimed by many in the LGBTQ community. It should only be used cautiously by those outside the community.

**Questioning**: the process of exploring one’s gender or sexual orientation.
LGBTQ Terminology

**Same-Gender Loving (SGL):** a culturally affirming African American gay, lesbian, or bisexual identity.

**Sexual orientation:** a person’s sexual or romantic interest. Examples: lesbian, gay, heterosexual.

**Tranny:** an offensive slang term used for transgender people. This term has been reclaimed by some transgender people as a symbol of pride but should not be used by those outside the community.

**Transgender:** a person who does not identify with the gender assigned to them at birth. Other appropriate terms would be transwoman or transman. Example: a biological female who identifies as a man.

**Transphobia:** the fear, discomfort, intolerance, or hatred of transgender and gender-nonconforming people.

**Transitioning:** the process of a person developing and assuming a gender expression to match their gender identity.

**Transsexual:** a medical term used to describe a person who does not identity with the gender assigned to them at birth and is undergoing gender affirmation surgery. This term is outdated and should be avoided unless asked to use it by a transsexual person.

**Transvestite:** a person who cross-dresses. Not to be confused with transgender or transsexual. This term is outdated and should be avoided unless asked to use it by a transvestite person.

**Two-Spirit:** a term traditionally used by some Native American tribes to recognize individuals who possess qualities or fulfill roles of both genders.
Resources

Gay, Lesbian, and Straight Education Network
http://www.glsen.org/

Parents and Friends of Lesbians and Gays
http://community.pflag.org

Gay and Lesbian Alliance Against Defamation
http://www.glaad.org/

National LGBTQ Task Force
http://www.thetaskforce.org/

Human Rights Campaign
http://www.hrc.org/

Out Right Action International
https://www.outrightinternational.org/

National Center for Transgender Equality
http://www.transequality.org/

The National Coalition of Anti-Violence Programs
http://www.avp.org/about-avp/coalitions-a-collaborations/82-national-coalition-of-anti-violence-programs

From Policy to Practice: Nondiscrimination and Inclusion of LGBTQ Individuals in Victim Services Programs

WCSAP’s Strategies for Supporting Queer Survivors
www.wcsap.org/setting-stage-strategies-supporting-lgbtqi

WCSAP’s Working with LGTBQ Teens
www.wcsap.org/working-lgbtq-teen-survivors

VAWnet’s Culturally Competent Service Provision to Lesbian, Gay, Bisexual and Transgender Survivors of Sexual Violence
www.vawnet.org/Assoc_Files_VAWnet/AR_LGBTSexualViolence.pdf

A Guide for DV and SA Service Providers Working with LGBTQ People of Color

FORGE
https://forge-forward.org/

Safety Planning with Transgender Clients

Gender Neutral Body Maps for SANEs and healthcare providers

A Transgender Survivor’s Guide to Accessing Therapy

Transgender Crisis Line
www.translifeline.org

NSVRC’s Research Brief on Sexual Violence and Individuals who Identify as LGBTQ
http://nsvrc.org/sites/default/files/Publications_NSVRC_Research-Brief_Sexual-Violence-LGBTQ.pdf
Resources

Human Right Campaign’s Resources
http://www.hrc.org/resources/entry/sexual-assault-and-the-lgbt-community

Tips on How to be a Transgender Ally
http://www.glaad.org/transgender/allies

Sheltering Transgender Women: Providing Welcoming Services

North American Aboriginal Two Spirit information page
http://people.ucalgary.ca/~ptrembla/aboriginal/two-spirit-two-spirited-word-history.htm

Suicide Prevention and Two-Spirited People

Self Help Guide to Healing and Understanding
References


The Resource Sharing Project (RSP) was created to help state sexual assault coalitions across the country access the resources they need in order to develop and thrive as they work to support survivors and end sexual assault. For more information, visit www.resourcesharingproject.org.

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