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In American society, the mainstream formula story for intimate partner violence depicts a scenario where an aggressive male perpetrator enacts physical violence against a helpless female victim. This formula story is heteronormative and relies and cis-gender actors who adhere to gender roles, leaving transgender and non-binary survivors without a narrative to legitimate their experience. Little research on intimate partner violence examines abuse in the lives of transgender and non-binary individuals, though the limited existing research indicates that transgender individuals seldom disclose their experiences to others.

Through semi-structured interviews with nine transgender and/or non-binary survivors of IPV, this study examined the barriers and aids that transgender and non-binary survivors face when deciding whether to disclose their abuse. Participants indicated transphobia, minimization of abuse, and threats to outness as barriers that prevented disclosure. Participants also indicated interpersonal and structural support, a sense of urgency, and a desire to help others as aids to overcome these barriers. While such barriers and aids took various forms and meaning based upon the survivors race, sexuality, and ability status, more research is needed that explores the effects of intersecting identities.

# EXPLORING EXPERIENCES OF DISCLOSURE FOR TRANSGENDER AND NONBINARY SURVIVORS OF ABUSE

by

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A Thesis Submitted to the Faculty of The Graduate School at The University of North Carolina at Greensboro in Partial Fulfillment of the Requirements for the Degree Master of Arts

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Approved by	
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# To my partner, Whitney,

whose constant love, compassion, care, and belief in me has made this thesis possible.

Thank you for filling my life with joy, light, and inspiration.

Te amo. Always.

# APPROVAL PAGE

This thesis written by VICTORIA A. KURDYLA has been approved by the following committee of the Faculty of The Graduate School at The University of North Carolina at Greensboro.

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#### CHAPTER I

#### INTRODUCTION

From social movements that formed to respond to intimate partner violence (hereafter, IPV), a particular formula story for IPV has emerged. In this formula story an aggressive male perpetrator severely abuses a helpless female victim (Loseke, 2001) who must then appeal to the state for safety and protection (Coker, 2005; Erbaugh, 2007; Loseke, 2001). While this formula story may initially be helpful to understand and identify IPV, its storyline is solely limited to heterosexual couples with cisgender, female survivors who adhere to gender norms and have a positive relationship with the criminal justice system (Coston, 2010; Erbaugh, 2007). These formula stories may create structural limitations that could make it difficult for survivors with gender diverse identities to disclose their abuse to others because they do not fit into the fixed, gender binary necessary for this narrative. Hence, individuals with transgender and/or non-binary gender identities may be survivors with narratives that are not legible to others. To the extent that these story lines are not recognized or accepted, individuals with identities outside the fixed gender binary may be denied assistance.

The purpose of this study was to explore the extent to which heteronormative formula stories about IPV impede the willingness among individuals with diverse gender identities to disclose abuse. Through interviews with nine survivors of intimate partner

violence who also identified as either transgender, non-binary, genderqueer, or gender nonconforming, I explored the following research questions:

- 1. Following the violent episode(s), what obstacles or aids do survivors of IPV with non-normative gender identities face when deciding whether or not to disclose their abuse to others?
- 2. How does an individuals' gender identity combined with their knowledge of the formula story for IPV impact a survivors' experience with disclosure or non-disclosure?
- 3. To what extent do other social identities, such as race and class, affect either willingness or reluctance to disclose abuse?

# Is Disclosure Necessary?

By focusing on barriers to disclosure, this study was undergirded by the assumption that disclosure is an important and positive strategy to surviving IPV and making IPV visible. This position is rooted in decades of social and political movements to "break the silence" surrounding IPV (Barnett, Miller-Perrin, & Perrin, 2011).

Disclosure, however, is not always a positive or helpful experience, especially for those in LGBT communities (Chavez, 2013). In the following chapter, I have discussed the tactic of breaking the silence and the act of coming out of the closet as they manifest individually and relatedly, tracing the rise in disclosure as a social, political, and personal strategy. I also focused on the positive and negative implications of disclosure. While disclosure isn't always a positive or necessary experience, this study sought to understand when and why it is or is not useful.

# **Terminology**

For this study, I was concerned with those who have transgender and/or non-binary gender identities, meaning those who do not identify with the gender assigned to them at birth. Research on transgender survivors of IPV is limited (Erbaugh, 2007), and the little research that exists focuses on individuals who cross over the gender binary, ignoring non-binary survivors (Bornstein, Fawcett, Sullivan, Sentiura, & Shiu-Thorton, 2006; Carlton, Cattaneo, & Gebhard, 2015; Goldberg & White, 2011; Grant et al., 2011; Greenberg, 2012; Stryker, 2008). Because of the limited research on transgender and/or nonbinary survivors, I also referenced studies that focused on "LGBT" (Bornstein et al., 2006; Carlton et al., 2015; Coston, 2010; Guadalupe-Diaz, 2013) or "queer" (Erbaugh, 2007; Everhart & Hunnicutt, 2013; Gamson, 2004; Stryker, 2008) survivors.

While "transgender" often is used as an umbrella term for those who do not identify with the gender assigned at birth, the term does include binary, as well as non-binary, gender identities (Currah, 2006; Stryker, 2008). Some individuals who identify as nonbinary may not use the term "transgender" to describe themselves, while others might. The term "LGBT" which stands for "lesbian, gay, bisexual and transgender" includes lesbian, gay, and bisexual individuals who may be transgender or cis-gender. Cis-gender describes those who identify with the gender assigned at birth, challenging the notion of being non-transgender as an unspoken norm (Stryker, 2008). Queer is also often used as an umbrella term to identify those with gender or sexual identities that do not adhere to heteronormativity (Stryker, 2008). I acknowledge the discrepancies in the

different language used throughout this thesis, and I hope it highlights the need for research that solely focuses on transgender and non-binary gender identities.

#### CHAPTER II

#### REVIEW OF THE LITERATURE

## **A History of Intimate Partner Violence**

While violence against intimate partners may have always occurred, IPV has not always been considered a social problem. Instead, over time, IPV evolved into a social problem through advocacy efforts and a changing social and political climate (Barnett, Miller-Perrin, & Perrin, 2011). This evolution resulted in a frequently changing definition of IPV- including how IPV occurs and who is affected by IPV- also allowing for different approaches to addressing IPV.

IPV—originally considered "wife abuse"—rose to public awareness due to advocacy efforts associated with the women's movements of the 1960's and 1970's, though even this rise was made possible from earlier women's movements (Barnett et al., 2011). Before the early struggle for women's rights in the mid-1800's, many marriage laws gave men the legal right to hit their wives (Barnett et al., 2011). At that time, women were often considered men's property, and men had jurisdiction to govern their wives, forcefully if necessary (Barnett et al., 2011). As the suffragist movement rose to prominence in the early 1900's, women fought to be equal to men—no longer being treated as property. Though this movement did not address wife abuse, early feminists laid the ground work to make this problem visible.

Wife abuse became a prominent social issue with the second wave feminist movement of the 1960's and 1970's. Originally, the focus of this movement rested on abortion rights and discrimination against women in the workplace; however, with the opening of the first battered women's shelter in England, wife abuse gained public attention (Barnett et al., 2011). Soon, multiple organizations began advocating for violence against women to become a social problem and to receive national attention. While this movement succeeded on a national level resulting in public policy and organizational support for battered women, the movement also limited the definition of IPV to consist only of battered cisgender women (typically wives) in heterosexual relationships—creating a formula story of IPV (Kim, 2013; Loseke, 2001).

#### **Formula Stories of Intimate Partner Violence**

As advocates and activists tried to raise further awareness about IPV and establish policies and resources to help survivors, a story about IPV began to emerge. This story illustrates IPV in a particularly gendered and heteronormative context, where an aggressive male perpetrator enacts severe physical violence against a helpless female (Erbaugh, 2007; Goldberg & White, 2011; Loseke, 2001). This strategic formula story was used to gather support to conduct research on, provide social services for, and establish criminal justice responses to violence against women, and, in many ways, advocates successfully created significant changes in policies and services. These changes, however, only benefitted survivors from gendered, heteronormative instances of IPV.

As this formula story entered mainstream discourse about IPV, LGBT survivors were made invisible (Coston, 2010; Erbaugh, 2007; Everhart & Hunnicutt, 2013; Goldberg & White, 2011; Walters, 2011) because LGBT survivors rarely fit into the heterosexual or gendered categories necessary to adopt such a narrative (Erbaugh, 2007; Everhart & Hunnicutt, 2013). By focusing on only heterosexual couples consisting of cisgendered individuals, this formula story of IPV ignores the instances of violence amongst couples in same sex relationships, even though same sex couples are estimated to experience violence in relationships at similar rates to heterosexual couples (Erbaugh, 2007; Guadalupe-Diaz, 2013). As of 2013, only three states (Hawaii, Maine, and Washington) had legislation that explicitly protects survivors of IPV in same-sex relationships (American Bar Association, 2013), while four states, including North Carolina, had legislation that clearly defines intimate partner violence as occurring only between heterosexual couples (Domestic Violence, 1989), ignoring the prevalence of IPV amongst non-heterosexual couples and potentially denying legal assistance for LGB survivors.

This formula story also actively ignores those who do not adhere to the gendered expectations assigned to "victim" and "perpetrator". The victim-perpetrator binary relies on a dichotomy of gender expression, where the "survivor" is associated with femininity and vulnerability and "perpetrator" is associated with aggressiveness and masculinity. Through focus groups, Hollander (2001) found that people reproduced the category of vulnerable female victim in trivial interactions while men were considered invulnerable. Despite this common misconception, not all cases of IPV have such a clearly defined,

helpless female victim, and individuals who do not express such clearly defined gender roles, do not adhere to the gender roles that match their gender assigned at birth, or do not identify with a binary gender at all are often left at the margins—unable to obtain services or speak out about their experiences (Erbaugh, 2007; Everhart & Hunnicutt, 2013; Loseke, 2001; Walters, 2011). Such a desire to uphold the gender binary is commonly reflected in various social institutions, including education, religious, medical, and criminal justice systems (Currah, 2006; Lorber, 1994; Spade, 2011), often casting those outside the binary as deviant, criminal, or unworthy of help (Spade, 2011). The campaign to "break the silence" that is so often articulated in domestic violence movements only gives voice to some—perhaps unintentionally—while transgender survivors are left without a narrative to identify their experience and facilitate their seeking assistance.

In addition to the gendered and heteronormative limitations of this mainstream formula story for IPV, it also tends to represent a middle class, white story. The helpless, vulnerable, femininity described in these stories tend to portray the middle-class, white woman who has been portrayed as such since the Victorian era (Zackodnik, 2004). Meanwhile, poor women and women of color who tended to be laborers or slaves at that time, were exempt from this story and considered more masculine (Collins, 2000; Truth, 1851; Zackodnik, 2004). As demonstrated by women's sovereignty, gendered labor laws, and other causes within the first and second waves of feminism, women of color were not fully considered "woman" as the early fights of feminism did not include changes that significantly improved their lives (Newman, 1999).

Even today, this stereotyping of black women erases them from IPV formula stories as they are considered incapable of such vulnerability. Women of color are often highly sexualized and portrayed as aggressive, primal, and violent (Newman, 1999; Ritchie, 2006; Wriggins, 1982). The same is true for black men who are often criminalized at higher rates due to a perceived dangerousness (Holland, 2001). Poor individuals, too, are often criminalized and have historically been labeled as deviant (Ignatieff, 1978; Piven & Cloward, 1993), and both poor people and people of color are often associated with dangerousness and violence (Hollander, 2001), falling more in line with the "perpetrator" identity. Poor people and people of color who experience IPV, therefore, also have no narrative. Consequently, these survivors may have difficulty obtaining support and assistance.

Because identities do not exist in a vacuum, the assemblage of multiple identities sculpts an individual's experience of the social world (Crenshaw, 1991; Collins, 2000; Puar, 2007). Patricia Hill Collins (2000) describes this idea as interlocking systems of oppression in which the combination of an individual's oppressed and privileged identities determines an individual's life experience. While some sociological studies examine the way singular identities affect experiences of intimate partner violence and the IPV narrative (Bornstein et al, 2006; Coston, 2010; Renzetti, 1996; Walters, 2011), little to no IPV research examines the complexity of multiple marginalized identities, especially at the intersection of race, gender, and sexuality (Mendez, 1996; Ritchie, 2006). Transgender people of color in gay or straight relationships have a complicated and violent relationship with social institutions from which they are often excluded, and

within which they are criminalized and/or brutalized (Stryker, 2008). Within sociology, more research is needed to explore these relationships and how they deny transgender people of color inclusion in the formula story for IPV, creating major obstacles to disclosing.

# **Deconstructing the Binary**

American society tends to organize itself around a binary gender system. This system leaves two options for someone born into society: man or woman, and this identity is typically thrust upon individuals at birth based on their perceived biological sex. This gender identity also pairs with a set of gender roles, or shared expectations for how individuals should behave based on their gender identity (Lorber, 1994). Throughout history people have existed who live outside of and challenge this idea of gender. For some, this has consisted of expanding or breaking down the idea of gender roles while still upholding a fixed, gender binary. For others, this has meant transgressing across gender identities—disrupting the unquestioned relationship between biological sex and gender identity yet still upholding the gender binary. Still, others have sought to deconstruct the binary system of gender, through rejecting gender, fluidly moving across and between gender, or identifying with multiple genders. This rejection of the binary has a rich history deeply intertwined with racial and sexual identities (Stryker, 1994).

In present day, those who transcend the gender binary in a way that separates gender identity from biological sex are often considered "transgender". This term, however, is relatively new and takes on different meanings, uses, and connotations (Stryker, 1994). Many use the term as an umbrella term referring to all identities that cut

across sex/gender boundaries (Currah, 2006; Stryker, 1994; Wilchins, 2004). The term may be embraced and used as a source of empowerment. Scholars in the field of transgender studies, have used the term to expand scholarly discourse on gender, and to challenge the idea of gender as fixed and natural (Stryker, 1994). Others, however, have used "transgender" to indicate one-directional movement from one binary gender to another with less room for fluidity or in-determinability. This use of the term has been critiqued as limiting and harmful (Aizura, 2011; Wilchins, 2004). Some also used the term to simply point to an ominous third category alongside "man" and "woman" that lumps together a diverse array of identities that do not fit the gender binary (Currah, 2006; Towle & Morgan, 2002). In these instances, the term still fails to effectively challenge the gender system currently in place, and it leaves those who do not neatly fit into a gender (whether it pairs with their biological sex or not) on the margins.

The construction of transgender identities cannot be viewed without an analysis of race and sexual identity. Like with many social movements, the first individuals to challenge the system tend to be those with only singular oppressed identities. In this case, "cross-dressing", straight, white men were the first to begin advocating for what we now consider transgender rights (Stryker, 2008; Wilchins, 2004). Virginia Prince—a leading white advocate in the 1940's and 1950's—fought for the ability of straight men to cross-dress and/or present as women while trying to separate the association between cross-dressing and homosexuality, which she condemned (Stryker, 2008; Wilchins, 2004). Due to her class status and racial identity, she managed to wage this fight from private spaces, such as homes or hotel rooms. Though her marginalized identity did still expose her to

danger and discrimination, her class status, racial identity, and sexuality allowed her the privilege to advocate for the rights of some with a little more protection (Stryker, 2008). This was the case for many early victories for transgender identity. These victories only existed for those straight, white, trans individuals who upheld a binary gender system that they sought to move across.

Meanwhile, poor people of color who were gay and/or transgender faced frequent brutalization and discrimination (Stryker, 2008). Lacking the privilege of private space, transgender and non-binary people of color were more likely to be victimized by both individuals and larger systems, such as the police and criminal justice system (Shah, 2005; Stryker, 2008). The intersection of multiple marginalized identities left them with labels of "deviant", "criminal", and "dangerous." Mainstream white movements erased their existence even though today trans people of color experience a higher rate of hate based violence and discrimination in the US (Grant, et al., 2011). Even resistance movements that were led by trans people of color, such as Stonewall, have been repainted to describe a whitewashed and mostly LGB movement (Stageman, 2017; Stryker 2008; Wilchins, 2004).

#### The Problem with LGBT

Certain scholars critique the inclusion of "T" in the LGBT acronym. Including the "T" implies a blurring between gender and sexuality where transgender experiences are assumed to be like lesbian, gay, and bisexual experiences (Salamon, 2010). This also allows for lesbian and gay experiences to be generalized and applied to transgender identities while transgender identities are ignored and made invisible.

While early, homophobic ideas of sexuality, linked sexual identity to gender expression, scholars have worked to separate conceptualizations of sexuality and gender (Wilchins, 2004). In fact, gender identity and sexual identity are two separate identities that do not rely upon each other to exist. One can be cisgender, transgender, nonbinary, etc. while also identifying as lesbian, gay, bisexual, etc. Experiences with sexuality and homophobia are also different experiences than those with gender and transphobia. By placing "T" in the LGBT category, scholars ignore the differences between the two, conflating gender identity with sexuality. In addition, because lesbian, gay, and bisexual are often seen as separate and exclusive identities (i.e. one is not lesbian and bisexual), including the "T" in this acronym minimizes the possibility of transgender individuals to identity as "LGB" or as heterosexual (Salamon, 2010).

In addition, lumping the "T" into this acronym allows for transgender experiences to be erased and minimized. Activists and scholars both refer to LGBT individuals when talking solely about lesbian and gay individuals. This is done even in the research on IPV (Brown, 2011). Most researchers who explore IPV in the LGBT community do not include research amongst transgender survivors (Brown, 2011; Carlton et al., 2015). By invoking an acronym that includes trans identity while failing to include trans identities and experiences, scholars run the risk of minimizing the need for research that includes transgender survivors. The existing research on IPV also reflects a white standard with little research focusing on LGBT survivors of color (Morin, 2014; Renzetti, 1996; Walters, 2011), and, therefore, does not indicate the specific barriers and consequences that may affect trans survivors of color.

#### The Need for Disclosure

While the current study sought to investigate barriers to disclosure, it is important to understand the focus on disclosure as an important strategy meant to help survivors. Within social movements to end intimate partner violence exists a history of using disclosure as a strategy to effect policy change, increase awareness, and give a personal sense of healing and closure. Survivors have been encouraged to "break the silence" surrounding intimate partner violence to help raise awareness and erase stigma (Barnett et al., 2011). This utilization of disclosure parallels the LGBT movement to "come out of the closet", also to raise awareness, erase stigma, and increase individual well-being. Both strategies have yielded the promised benefits for some, though disclosure can also increase harm and negative consequences for others. Especially in LGBT communities where breaking the silence may require coming out, disclosure may not be a safe or useful strategy.

For survivors of IPV, "breaking the silence" has long been a strategy to raise awareness and create legal change surrounding abuse (Barnett et al., 2011). Proponents of this strategy have argued that silence surrounding abuse is dangerous as survivors are unable to access services or leave their relationships if their experiences are shrouded in silence. Additionally, many argue that other survivors will feel isolated, and legislators will not recognize how prevalent the issue is. Breaking the silence, then, has been framed as a positive step, and many awareness campaigns have since arisen to break the silence (Barnett et al., 2011). These include the Clothesline Project and Take Back the Night events to speak out against sexual violence (Clothesline Project, 2015; Take Back the

Night, n.d.). Additional awareness strategies include the use of personal testimony by survivors to raise support for a bill during legislative session. While the term, "breaking the silence," has often been associated with the movement to end IPV, this visibility strategy has been important for various social movements. For the LGBT community, this strategy resulted in mass mobilizations to come out of the closet and live "out and proud".

Especially before the Stonewall Riots, LGBT individuals felt forced to hide their sexuality and/or gender identity for their own personal safety (Humphreys, 1976). "The closet" created a metaphorical private space where LGBT individuals could hide to remain free from harm and criminalization. Because of this, the closet wasn't an intrinsically negative space, though it was also considered a constricting and limiting space (Chavez, 2013). As the LGBT identity became more pronounced and solidified as an identity, the closet became equated to a prison and source of oppression that denied someone the ability to be their authentic self. With movements like the Stonewall Riots, where LGBT people of color fought back against criminalization and victimization based upon their sexuality or gender identity, the LGBT movement gained momentum, strength, and empowerment (Stryker, 2008; Wilchins, 2004). With this shift came a different political strategy: to be "out and proud" (Chavez, 2013; Humphreys, 1976).

Today an example of this push for public disclosure can be seen through "National Coming Out Day" (NCOD), celebrated each year since 1987 on October 11 (Chavez, 2013). NCOD encourages closeted LGBT persons to come out, declare their sexuality or gender identity publicly, and take up space with this identity. Advocates for

NCOD indicate that coming out can draw awareness to the prevalence of gay and trans identities, fight against the stigma surrounding LGBT identities, and push for public policy (Chavez, 2013). Advocates as well as scholars also suggest that coming out can increase individual well-being and mental health (Feldman & Wright, 2013). Coming out is seen as both a community-wide strategy with social benefits and a personal strategy with individual benefits.

Problems with disclosure. Both the movement to break the silence and come out of the closet have been centered on an idea of visibility politics. Because sexuality, gender, and experiences of IPV can both be readily concealed, activists have advocated for making one's identity visible and placing it in the spotlight, so that it will not be erased or ignored (Barnett et al., 2011; Chavez, 2013; Stone, 2006). While this disclosure has been reported to have a variety of benefits, these benefits don't exist for everyone. In the LGBT community, coming out doesn't automatically relieve someone from stigma and discrimination. Based on social location, coming out can still be a threat to physical, emotional, and financial well-being, and many fear disclosing an LGBT identity (Grant et al., 2011; Humphreys, 1976). LGBT individuals could be fired from a job, kicked out of a home or family, or physically and verbally victimized (Grant et al., 2011; Humphreys, 1976). Remaining "in the closet" may be the only way to remain relatively safe.

Because of these potential consequences to coming out, breaking the silence of IPV can also be dangerous for LGBT individuals since disclosure of victimization may also require coming out of the closet. Especially for gay, lesbian, and bisexual survivors, disclosure of IPV requires disclosure that one has a same-gender partner, and some

survivors report an unwillingness to disclose due to an unwillingness to come out (Carlton et al., 2015). Outing a partner is often even a tactic used by abusive partners in same-gendered relationships (Diaz, 2013; Erbaugh, 2007; Renzetti, 1996). For transgender individuals, disclosing IPV may also require coming out or risking being outed by the abusive partner. This can also risk physical, emotional and financial well-being, especially since transgender individuals are more likely to face unemployment and violence than LGB individuals (Grant et al., 2011). Disclosure can also be unappealing as not all transgender individuals even desire to come out (Stone, 2006).

Outing versus passing. While coming out has been a strategy for the lesbian and gay community, it has been a strategy up for debate in the transgender community. For many transgender individuals, primarily those who transcend across the gender binary, they desire to "pass" as a particular gender (Stone, 2006; Wilchins, 2004). The goal is not to come out and stand out but to blend in, and coming out may not increase personal well-being but rather increase discrimination and a disconnected sense of self. A common transgender narrative rests in the ability to travel across the binary, transition into a gender identity, and erase the past (Aizura, 2011; Stone, 2006). Because this may be a desire for some, coming out would be an unhelpful and even harmful strategy. If breaking the silence of IPV for transgender survivors would also require or risk coming out as transgender, this could problematize disclosure, as well.

Other scholars challenge the idea of both "passing" and "coming out", arguing that some transgender bodies, especially non-operative black and brown bodies, are not always read or perceived within the gender binary (Snorton, 2009; Wilchins, 2004).

Traditional discussions on passing and coming out rely on a premise that transgender individuals can and want to "pass" and should choose to come out, ignoring those who may not pass and who may never choose to pass (Snorton, 2009; Wilchins, 2004). For nonbinary individuals and some transgender individuals, "passing" and "being out" can be more complex experiences that shift based upon their gender presentation as well as how others perceive their gender (Snorton, 2009; Wilchins, 2004). Since gender is still often situated within a binary, nonbinary identities are not always legible. Those outside of the gender binary may never "pass" as one gender or the other, or they may pass differently in shifting contexts (Snorton, 2009). Gender identity may be less important than gender perception, and coming out may be a more complex process when disclosing abuse. Thus, non-passing individuals may encounter different barriers to breaking the silence surrounding IPV.

#### **Barriers to Disclosure**

While extensive research has been conducted about IPV survivors, this research is centered on the needs and experiences of straight, mostly white, women—research involving lesbian, gay, bisexual, and transgender (LGBT) survivors is significantly lacking, and most of this research focuses on lesbian and gay relationships rather than those who are transgender or have non-binary genders (Bornstein et al., 2006; Carlton et al., 2015; Erbaugh, 2007). Furthermore, very little research exists for transgender survivors (Everhart & Hunnicutt, 2013). In the few studies that exist, both Bornstein et al. (2006) and Carlton et al. (2015) identified certain barriers which complicate survivors' abilities to disclose their experiences of abuse. These barriers include: difficulty

identifying their experiences as abuse, refusal of others to identify their experiences as abuse, fear of stigma surrounding homophobia and/or transphobia, and fear of further victimization by the state (Bornstein et al., 2006; Carlton et al., 2015; Everhart & Hunnicutt, 2013). Such barriers reflect the complications that arise when excluded from the typical narrative of abuse used to identify and help survivors.

Difficulty identifying abuse. Researchers exploring the experiences of LGBT survivors of IPV have found that many survivors have difficulty initially identifying their experiences as abuse (Bornstein et al., 2006; Carlton et al., 2015; Diaz, 2013; Everhart & Hunnicutt, 2013). Such findings are similar to those in studies of cisgender, female survivors. Evans and Feder (2014) found that cisgender, female respondents often minimized their experiences of violence in their relationships, either blaming themselves for the abuse or viewing their partner's behavior as normal. This also limited women's likelihood of disclosing their experiences and seeking help (Evans & Felder, 2014).

While the difficulty identifying abuse may be similar amongst cisgender, women and transgender survivors, the reasons behind this challenge may be different. Because the most prevalent information surrounding intimate partner violence reinforces the gendered and heteronormative narrative, Carlton et al. (2015) found that respondents indicated having a limited understanding of IPV in LGBT relationships. This created confusion when it came to identifying their own experiences, which wouldn't fit neatly into the narrative. For example, if their partners did not identify as male, they may have difficulty linking their partner's behavior to behavior associated with IPV because only males are supposed to have aggressive behavior. Female identified individuals aren't

commonly associated with aggressive behavior, and those who don't fit into the binary haven't been ascribed traits and behaviors by society. Respondents, therefore, reported an initial inability to identify their experiences as abuse (Bornstein et al, 2006; Carlton et al., 2015; Diaz, 2013). Erbaugh (2007) also noted that the gendered structure of the victim-perpetrator binary can leave little room for queer individuals to interpret their experiences.

This inability to identify their experiences as abuse can also lead survivors to minimize their experiences. Survivors may feel their experience is less severe than abuse and that their experiences aren't worthy of help or attention (Diaz, 2013). Without a clear narrative to share, and with the belief that their experience isn't a serious problem, the failure to relate one's experiences to IPV also prevents survivors from disclosing their abuse to others. Even if they do recognize their experiences as abuse, some will still hesitate to disclose for fear that others may not similarly recognize their experience.

Invalidation from others. Many LGBT survivors of IPV do not seek help, especially from criminal justice or social service agencies, due to invalidation from others (Bornstein et al, 2006; Everhart & Hunnicutt, 2013). Just like LGBT survivors have difficulty understanding IPV in LGBT relationships, those outside of the LGBT community also have difficulty understanding due to a lack of awareness of and exposure. The lack of understanding and awareness can lead to minimization and gaslighting of experience from friends, family, and community members, as well as social service agencies and other support systems.

In previous studies, respondents tell stories of their experience being dismissed or minimized by friends and family when seeking support (Bornstein et al, 2006; Everhart & Hunnicutt, 2013). Due to the current IPV narrative, these friends or family members may not readily identify IPV as being possible for relationships that don't fit neatly into a heteronormative, fixed gender binary. If the abusive partner does not identify as male, others may minimize the severity of the abuse or the ability of that partner to be abusive, and if the survivor does not identify as female, family and friends may not consider them helpless enough to be real victims.

Similar experiences occurred when respondents tried disclosing to other support systems, such as non-profits, domestic violence shelters, or the criminal justice system (Walter, 2011). Because most shelters and agencies for IPV arose from a demand articulated through the mainstream IPV narrative, these services tend to be limited to cisgendered, heterosexual women. Agencies may not be knowledgeable about LGBT issues and typically lack both staff and services that reflect LGBT populations and their specific needs (Erbaugh, 2007; Mendez, 1996; Renzetti, 1996). For example, domestic violence shelters tend to be "women only" which fails to protect women survivors whose abuser identifies as a female and fails to offer space for those who do not identify as women or who aren't cisgender women (Goldberg & White, 2011; Greenberg, 2012; Morin, 2014). The lack of services leaves LGBT survivors with no place to turn.

**Stigma and discrimination.** In addition to the lack of awareness surrounding IPV amongst LGBT couples in the mainstream, many survivors also describe feeling stigmatized and discriminated against (Carlton et al, 2015). In general, LGBT people tend

to experience higher levels of discrimination than straight people, and those who identify as transgender or nonbinary experience even higher levels (Carlton et al., 2015; Grant et al., 2011). The National Transgender Survey indicated that 63% of participants had experienced discrimination due to their gender identity (Grant et al., 2011). These experiences of violence and discrimination make it difficult for LGBT survivors of intimate partner violence to disclose their experiences without the fear of further victimization and prejudice, and researchers have found that fear of discrimination is often reported by respondents as a reason for not disclosing to agencies and law enforcement (Carlton et al., 2015; Everhart & Hunnicutt, 2013).

Because disclosing experiences of IPV may also involve coming out about one's gender identity, respondents may fear discrimination in different social institutions based upon the transphobia within these institutions. This can include a fear that disclosing one's experience will lead employers, religious leaders, neighbors, or other community members to discover the survivor's gender identity, potentially resulting in being fired from a job and losing financial security, being kicked out of a religious organization, or being ostracized from a neighborhood or community (Grant et al., 2011; Humphreys, 1976). Researchers reported similar findings in studies of gay and lesbian survivors of intimate partner violence where survivors may fear potential transphobia that can occur after being outed (Renzetti, 1996). For some, the threat of intimate partner violence may feel safer than the threat of discrimination, and the lack of services at agencies for LGBT-identified survivors can increase this fear of discrimination (Morin, 2014), as does the history of violence and victimization of LGBT people at the hands of law enforcement.

State violence. In the current narrative of IPV, the criminal justice system and law enforcement agencies are painted as the benevolent savior and protector for those experiencing abuse, but law enforcement agencies have a history of protecting certain people while victimizing and criminalizing those in marginalized groups (Carlton et al., 2015; Kim, 2013; Spade, 2011). The LGBT community has a history of abuse at the hands of law enforcement officers, including verbal and physical abuse, rape, and criminalization (Saffin, 2011; Stryker, 2008). By making criminal justice agencies the protector of IPV survivors, LGBT individuals—and especially LGBT people of color—are left without protection.

Currently, LGBT communities and heterosexual communities of color still face violence and criminalization by criminal justice agencies. Studies find that lesbian and gay couples face higher risks of mutual arrest in instances of intimate partner violence, even when there is a clear victim and perpetrator (Coston, 2010; Morin, 2014; Walters, 2011). People of color also face further risks of mutual arrest in heterosexual and gay relationships (Coker, 2005; Wriggins, 1984). Even outside of relationships, trans people of color face frequent harassment by police and sometimes face unlawful arrests under the assumption that they are sex workers or automatically deviant and criminal in some way (Grant et al., 2011; Saffin, 2011).

With this relationship to criminal justice agencies, LGBT survivors often report a fear of turning to the police for help (Erbaugh, 2007; Everhart & Hunnicutt, 2013; Guadalupe-Diaz, 2013). For some, this fear stems from a fear of personal victimization (Carlton et al., 2015; Everhart & Hunnicutt, 2013), and for others it is a fear of their

partner being victimized (Bornstein et al., 2006; Carlton at al., 2015). This holds especially true for people of color and those transgender people who have a history of victimization by law enforcement (Coker, 2005; Everhart & Hunnicutt, 2013; Wriggins, 1984).

#### **State Violence and Bathroom Bills**

The current political climate in the US reflects the ongoing discrimination and criminalization of trans bodies, and the idea of deviant transgender individuals is only further cemented in public discourse through the current slate of bathroom bills across the country. This legislation may only increase the fear of victimization by the state and lead to barriers disclosing IPV to law enforcement.

Transgender communities have a history and present of being criminalized. Recently, this criminalization has manifested through "bathroom bills". In 2017, fourteen states had considered legislation that "would restrict access to multiuser restrooms, locker rooms, and other sex-segregated facilities based on a definition of sex or gender considered with sex assigned at birth (Kralik, 2017)." This legislation relies on the argument that transgender individuals are dishonest, criminal, and a physical threat to cisgender women and children trying to use a public restroom (Jacobs, 2009). Many politicians who support bathroom bills cite the protection of women and children as a key reason to support the bills, implying that male sexual predators pretend to be transgender women to assault women and children in women's restrooms (Jacobs, 2009).

This rhetoric not only reinforces the idea that transgender individuals are deviant—it sends a message that transgender individuals, especially transgender women,

are untrustworthy, sexually perverse, and dangerous. Such bills seek to criminalize transgender individuals in public spaces like restrooms while also laying a groundwork to justify criminalizing transgender individuals in other spaces. Through these laws, criminal justice agencies are told to view transgender individuals as threats to the innocent victims that police officers protect, rather than being individuals that may need protection themselves.

These bills also seek to criminalize particular transgender bodies: those who do not pass and may express gender nonconformity, as well as those who have little access to private space. Not everyone can avoid using public restrooms, giving this legislation a classist and racialized meaning as well as a transphobic one. Legislation like this is a reminder for transgender individuals to fear the state, rather than to use the state for protection and can serve as one possible example for why transgender and gender nonconforming individuals may not report experiences of victimization to the police.

#### **Aids to Disclosure**

While the studies reviewed focused primarily on barriers and constraints to disclosing experiences of abuse and seeking help, certain studies also highlighted possible aids to disclosure. This included informal networks of support (Everhart & Hunnicutt, 2013) and affirming formal networks of support (Borstein et al., 2006).

Everhart and Hunnicutt (2013) found that queer survivors felt uncomfortable seeking formal sources of support from agencies or law enforcement. While these survivors perceived that there wouldn't be resources available for them by formal support networks, they focused more on communal networks and informal sources of support.

Supportive friends and loved ones within survivors' communities can serve as a facilitator to disclosing experiences, though these informal networks have particular barriers, as well. Because perpetrators may be a part of the same community, this may discourage participants from sharing their experiences for fear they will not be believed (Everhart & Hunnicutt, 2013).

While informal support networks can prove useful when disclosing experiences of abuse, Bornstein et al. (2006) also found that participants are more likely to use formal networks if they perceive these formal institutions are LGBT-affirming. Specifically, participants were willing to access services at a local agency because this agency promoted services aimed to be supportive of LGBT communities (Bornstein et al., 2006).

Just like research on barriers to disclosure for trans survivors is limited, so is research for aids to disclosure. Researchers that mention aids do not focus largely on these findings, and other researchers conducting studies with IPV survivors do not focus on aids unique to a transgender survivor's experience. For example, Lewis, Henriksen, and Watts (2015) explained that cisgender women survivors of IPV also relied on informal networks of support to end the relationship and recover from any trauma resulting from the abuse; however, this similar finding rests in a different context than that of transgender survivors as cisgender women may also have more access to formal support. In fact, Lewis et al. (2015) also acknowledged this importance of formal support services for these women.

With this study, I aimed to expand an understanding of potential aids for disclosure. While many transgender survivors may not disclose their experiences to

anyone, some survivors do, and it is important to understand the circumstances that make this disclosure possible. It may also be important to understand how one discloses their experiences.

# **Fitting the Narrative**

For many, the barriers to disclosing abuse prevent transgender survivors of IPV from telling others when in abusive relationships. Still, some survivors do disclose, and this decision can be a difficult one. Survivors are placed in a vulnerable position where their believability is based on worthiness as a victim, and since transgender survivors are not legible as victims and often targets of discrimination and stigma, they must navigate a system which they do not fit into in order to be recognized. While few researchers focus on transgender survivors who disclose in cases of IPV (possibly since most survivors don't disclose), research investigating disclosure for cis-gender victims of sexual violence and sex trafficking does exist.

These studies located the presence of an "ideal victim" narrative based off societal formula stories of violence, yet these studies varied in how participants respond to this formula story. For some, survivors adapted parts of their story and identity to better fit the "ideal victim" and receive assistance (Miller, 2004). This was also seen when individuals seek other forms of state assistance, such as welfare benefits (Lens & Cary, 2010). Researchers in this area have also indicated that a certain narrative is present that helps workers determine who should receive assistance. Other researchers have found that individuals will challenge this notion of the "ideal victim," claiming agency while still recognizing their worthiness as a survivor (Diaz, 2013; Jagervi, 2014; Loseke, 2001).

Conforming to the narrative. Some seeking assistance tend to attempt behaving according to a narrative deeming them worthy. They minimize other narratives, considering them road blocks to receiving help. In a study of welfare recipients, Lens & Cary (2010) found that respondents performed respect, timidity, and helplessness despite potential frustrations or experiences. Aware of the qualifications to be a deserving recipient and the conflicting perceptions of racial identities, African-American respondents reported a fear of appearing "too street." When an individual's identity contradicts the identity of the deserving recipient, one tries to minimize the undeserving identity and perform according to the narrative of worthiness.

Similar experiences are seen with sex trafficking victims who have received government help to escape their trafficking situation (Miller, 2014). Comparable to IPV, the narrative for sex trafficking involves the helpless female victim who is controlled and subjected to extreme violence by an aggressive male or organization of aggressive males. The victims must desire rescuing but be too helpless to escape. Trafficking victims have reported that they alter their story to perform this victim narrative. When they exhibit too much agency and not enough helplessness, they are not deemed worth of assistance even if they are still being forced into a trafficking situation (Miller, 2004). To avoid this rejection, survivors omitted instances that question their level of helplessness and performed a gender identity that is more passive or fragile. (Miller, 2004).

Both scenarios (welfare recipients and sex trafficking victims) indicate that individuals performed or behaved in a way that was deemed worthy by government institutions to receive help. These individuals were aware of the narratives constructed

for worthiness, and they were aware of how their identities fit into or contradict these narratives. Because of this, they adapted their identities and altered their interactions in order to be perceived as more closely fitting this construction (Lens & Cary, 2010; Miller, 2014).

Challenging the narrative. While the narrative of the "ideal victim" portrays the victim as weak and deserving of sympathy and support, researchers have found that some survivors will challenge this notion of weakness (Diaz, 2013; Jagervi, 2014; Loseke, 2001). Instead of emphasizing a weak femininity, participants focused on personal strength and agency to frame themselves as worthy of help. Some researchers found that participants successfully challenged this "ideal victimhood" while asserting their worthiness for help and while still defining their experience as abuse. Others found that challenging this narrative complicated the participant's ability to seek help and define their experience.

In a study of rape victims, Jagervi (2014) found that survivors reframed their experiences to highlight their own personal strength and confidence. Survivors stressed innocence and moral superiority to the offender as a claim of worthiness for assistance (Jagervi, 2014). Assistance was framed as a right rather than a need, and some survivors even rejected assistance, claiming self-sufficiency instead (Jagervi, 2014). These findings object to the necessity of an "ideal victim" narrative which focuses on gendered assumptions of femininity and helplessness.

Loseke (2001) found similar results when observing domestic violence support groups. While group facilitators focused on aspects of survivor's narratives that

reinforced the formula story of IPV, the survivors continued to share stories of personal agency, strength, and resistance to the violence in their relationships (Loseke, 2001). Thus, survivors challenged the formula story of IPV even as service providers were reinforcing it. Participants both framed their experience as abuse while refusing to identify as the ideal abuse victim. This suggests that the current formula story for IPV may have potential to shift and be adapted.

Finally, Diaz (2013) found in his study on transgender survivors of IPV that survivors rejected the notions of feminine helplessness when talking about their abuse. While these participants refused to identify with the passivity and helplessness they recognized in the formula story of IPV; this refusal also complicated their ability to identify their experience as abuse. This suggests that challenging the "ideal victim" narrative could again leave one without a way to explain their abuse, which may also leave the survivor without the means to disclose their experiences and seek help.

For the current study, I sought to further understand if a similar narrative construction would occur for transgender survivors who seek help in cases of IPV.

Because transgender survivors do not fit into the current narrative of intimate partner violence, this study examined how these survivors articulate their experiences.

# **Theoretical Foundations**

**Queer theory.** This study is informed by a queer theoretical perspective. Queer theory arose largely in the 1990's from postmodern and poststructuralist theories as a critique of and response to the growing recognition of Gay and Lesbian Studies (Cohen, 1997; Gamson, 2004; Seidman, 1996). While gay and lesbian studies utilized identity

politics to promote knowledge about a uniform and cohesive LGB community, queer theorists sought to deconstruct the idea that identity categories are normal, natural, or fixed (Butler, 2004; Gamson, 2004; Jagose, 1996). Queer theorists argue that identity is socially constructed and fluid. A focus on the fixed and naturalness of identity is a way for hegemonic institutions to regulate bodies (Butler, 2004; Jagose, 1996; Seidman, 1996). Queer theorists also challenge the assumed relationship between fixed categories of sex, gender, and desire.

By choosing participants with a transgender or non-binary gender identity, the current study focused on individuals who break away from normative gender. In western society, the ideas of both gender and sex are thought to be fixed and unwavering, rooted in nature and biology. These concepts are also supposed to be dichotomous. Scholars and activists in gay and lesbian studies relied on the idea of a fixed, gender and sexual binary to construct their identities as gay and lesbian—identities which can only exist with clear definitions and boundaries surrounding gender and sexuality (Gamson, 2004). Queer theorists challenged this notion of a fixed, natural gender binary, arguing instead that gender (as well as sexuality) is fluid and socially constructed (Butler, 2004; Cohen, 1997; Gamson, 2004). In fact, all identity categories are socially constructed, and these identities either reify or challenge existing hegemonic ideals. This belief created a conflict within queer theory regarding the importance of identity (Gamson, 2004). Some proponents of queer theory argued for a shift away from identity politics, arguing that identity falsely assumed a unified category based upon shared experience (Cohen, 1997; Gamson, 2004). Also, they argued that the construction of identity categories usually

results in opposition to a defined norm, thus reaffirming the existence of this norm (Butler, 2004). Other scholars within queer theory recognized identity construction as an important way to disrupt notions of a fixed, binary and to disrupt stable, hegemonic categories (Butler, 2004; Stone, 2006).

In this study, I acknowledged the fluid and ever-changing nature of gender and deconstructed the notion of a fixed and natural gender binary. None of my participants identified as cisgender which challenged the notion of a fixed gender that is unwavering from birth. Participants who identify outside of the binary also challenge the idea of gender being dualistic. While I recognized the validity in arguments calling for the dissolution of collective identity categories, my study was rooted in the belief that identity can also be a source of resistance to hegemonic ideas and a way to challenge dominant frameworks surrounding gender and sexuality. Transgender and nonbinary identities destabilize the notions of gender that structure our society. This assumption is also rooted in queer theory's belief in how society regulates bodies.

In addition, I acknowledged in my study how society classifies bodies and approves or denies validity, credibility, and resources based on the assigned meaning of those bodies (Butler, 2004; Jagose, 1996; Seidman, 1996). Queer theory has long been a proponent of this argument, citing numerous ways in which Western society enacts gendered forms of social control. Western society is largely organized around the gender binary (Lorber,1994). Gender determines the bathrooms and changing rooms that one uses. Gendered social control is also used to regulate bodies in schools, prisons, churches, and other social institutions. Society is structured and categorized based on gender and

sexual identities that are seen as unchanging, which means that those who do not fit into these categories or who challenge the fixedness of them challenge the very structure of society (Lorber, 1994). In response, individuals with these identities are invalidated, discriminated against, and denied resources. My study then sought to understand participants' experiences trying to navigate a society that relies on fixed notions of gender. Specifically, my study sought to determine the ways participants were denied resources or invalidated in an attempt to regulate gender identity.

Symbolic interactionism. In addition to queer theory, this study embraced a symbolic interactionist approach to identity formation and social interaction. In the perspective of symbolic interactionism, human beings become "humanized" through interaction with others (Manis & Meltzer, 1978). Individuals create meaning through social interaction, and this social interaction shapes individual behavior and identity formation (Manis & Meltzer, 1978; Rose, 1962). If humans create meaning through social interaction, this perspective also views reality as a more subjective experience, rather than an objective truth. Guided by this notion, this study sought to understand the meaning participants ascribe to their experience and the process used to ascribe that meaning. My analysis looked both at what they share and how they chose to share. Finally, Goffman (1959) argued that people interact in particular ways to elicit favorable, societal responses. This study tested if Goffman's (1959) ideas of dramaturgy could be extended to this subject.

Additionally, a symbolic interactionist perspective supposes that human beings create individual and social meaning through social interaction (Manis & Meltzer, 1978;

Rose, 1962). Behavior is learned rather than instinctual, and this learning process occurs through communication of symbols which are ascribed a collective meaning and value (Rose, 1962). West and Zimmerman (1987) applied this idea of symbolic interaction to the ways gender is reproduced in everyday life. They argued that everyone participates in a process of "doing gender" (West & Zimmerman, 1987). In social interactions, humans act out masculine or feminine behaviors to demonstrate their gender identity (Lorber, 1994; West & Zimmerman, 1987). This gender performance (re)inscribes notions of gender in society (Butler, 2004; Lorber, 1994; West & Zimmerman, 1987). Gender, therefore, is recreated on a micro-level through social interactions. Humans communicate symbolic representations of gender which reinforces the collective meanings and values of gender (West & Zimmerman, 1987).

My study was guided by this idea of "doing gender." Gender is a social construction created through symbols and human behavior within the confines of social interaction. This interaction depends on both the actor "doing gender" and the person receiving and interpreting this behavior. In this study, I was interested in the ways gender identity was constructed in narratives of intimate partner violence. Did participants assign a gendered meaning to their experiences and what is the process of doing so? Were participants' gender identities reconstructed in their narratives? Within social interaction, humans define themselves (Rose, 1962).

If meaning is created through social interaction, reality is arguably a subjective experience, though it may also be a collective one. People do not find an objective reality. They produce meaning through interaction and interpretation of that interaction (Rose,

1962). For this reason, this study did not seek to discover an objective truth about intimate partner violence. Instead, I sought to understand subjective experiences of IPV and decisions to disclose those experiences. I asked how individuals find meaning in their experiences and how they communicated that meaning to others. Through asking participants to describe their experiences and their decisions to disclose these experiences, participants had to interpret their experiences and assign them meaning. Symbolic interactionism can, thus, offer a useful lens in understanding these narratives, the process in assigning meaning, and the effect of audience on narrative construction.

Goffman (1959) expanded upon early symbolic interactionism perspectives with his idea of dramaturgy. With dramaturgy, Goffman explained human interaction in terms of a theater performance. Through performance, the audience attributes a particular self to the actor (Goffman, 1959; Meltzer, Petras, & Reynolds, 1978). In this performance, however, the actor would benefit from presenting themselves in a way that is well-received by the audience. Goffman believed individuals would present in ways that help them achieve a desired end (Goffman, 1959; Meltzer et al., 1978). This study borrowed from some of Goffman's (1959) ideas about dramaturgy. Again, using the assumptions within queer theory that society approves or denies validity and resources based upon gender presentation, while also assuming the existence of a formula story of IPV that denies validity to transgender and nonbinary survivors, my study sought to understand if and how participants disclose their experiences in ways that allow for recognition as a victim. Validation of their experiences could then be seen as a desired end that survivors can achieve through narrative construction that better fits the mainstream formula story.

#### CHAPTER III

### **METHODS**

My study design was framed through queer and feminist methodological perspective (Fine, 1992). Rather than uncover an objective truth, I examined the narratives of lived, subjective experience. This perspective grounded my interview questions, as well as my choice to interpret data using narrative analysis. For this research, I conducted semi-structured interviews. A semi-structured style of interviewing allowed space for participants to lead the conversation and tell the full story of their experiences. This interview style also allowed me to follow up on any markers or other interesting information provided in the interview. Semi-structured interviewing seemed beneficial to create rich, narrative data.

Each interview explored barriers participants experienced in disclosing their abuse and how they may have had to adjust their narratives to receive help. This research assumed the existence of an IPV narrative within society where an aggressive male perpetrator enacts severe violence against a helpless female victim. (Loseke, 2001). The study also proposed that those whose situations closely resemble this storyline were more likely to receive support (Loseke, 2001; Miller, 2004).

## **Data Collection**

For this study, I collected data through interviews with nine survivors of intimate partner violence. Respondents were included based on the following criteria: a) being at

least 19 years of age; b) having experienced intimate partner violence in a past relationship; c) having been out of the relationship for at least one year; and d) having identified as either transgender, non-binary, genderqueer, or gender nonconforming while in the abusive relationship.

Due to the sensitive subject matter and the fact that underreporting for IPV is common amongst transgender survivors and LGBT people in general, obtaining a random sample or a large sample for this study was difficult. Multiple people who demonstrated initial interest in the study became unresponsive when it was time to set up the interview. Two potential participants dropped out of the study for fear of discrimination, and one participant declined to set up an interview for mental health concerns. Everhart and Hunnicutt (2013) reported that survivors often will not speak out about their abuse for fear of rejection by their community as well as rejection by larger society. For some, the perpetrator is a known and respected part of the same community. For others, homophobia and transphobia in the family, workplace, or other social institutions creates a fear to disclose. While this study measures decisions whether or not to disclose, I recognize that participation in this study was, in itself, an act of disclosure. These factors made recruitment difficult, and with the current, growing transphobic legislation prevalent throughout the country, recruitment difficulties were expected.

To minimize these recruitment difficulties, I extended my sample population to include any individual residing within the United States. This was made possible through utilizing phone and online interviewing. Of my sample, one interview was conducted in person, seven interviews were conducted over the phone, and one interview was

conducted in an online, private chatroom. Participants were recruited through emails to LGBT Community Center listservs, support groups, and transgender online forums, as well as through posts to trans-specific social media groups. I also utilized snowball sampling techniques, asking respondents to refer other potential respondents that they may know.

Each interview lasted between forty minutes to two hours in length. The shortest interview was forty-one minutes long, and the longest interview was two hours and fifteen minutes long. This allowed time to discuss the subject in more depth. In the interviews, I collected data on individual perceptions of the IPV narrative and their identity, a narrative of the incident, and a narrative of their experience choosing whether to disclose (See Appendix A for interview guide). This information was recorded with permission from respondents and transcribed. Once transcribed, I followed an inductive approach to data analysis. The transcripts were initially coded to summarize parts of the data using labels that represent the possible meanings behind participant stories. These labels were then analyzed and combined to find emergent themes within the data.

# **Narrative Analysis**

Because this research focused heavily on narrative construction and the differences between narratives and lived experiences, I utilized narrative analysis in my qualitative research approach. "Narrative analysis, like the name implies, centers around the study of stories or accounts – usually of individuals, but also of groups, societies, and cultures (Narrative Analysis, 2008)." Through this methodology, "scholarship has come to recognize that examining the ways in which we 'story the world' contributes to

understanding how we create meaning (Robert & Shenhav, 2014). Storytelling is part of what makes us human. Historically, it is how we pass down history and tradition. It is also how we portray and reflect pieces of our identity and culture and how we organize our experiences and give these experiences meaning (Fraser, 2004; Riessman, 1993). Narrative enables us to present a version of ourselves and our stories to the world.

This concept is like those discussed in Goffman's idea of dramaturgy. Goffman (1959) argued that our social self is constructed through a performance, and in this performance, we present a version of ourselves that we want others to perceive as who we are. Narratives are one type of performance, and through narrative we are constructing a version of ourselves, our experiences, and the larger society. This narrative may be used in order to achieve some goal or outcome. Other narratives may exist outside the individual as societal narratives designed to recognize and/or create particular kinds of societal actors.

In this way, Loseke (2001) identifies the existence of a formula story about IPV within our society. This story is used to identify, classify, and provide assistance to survivors of IPV. While my research assumed the existence of this formula story, an analysis of how this story is perceived by transgender survivors seemed essential to determine how these survivors construct their own narratives and how (or if) they are able to disclose these narratives. By using narrative analysis, I treated these societal and personal stories as data for analysis. I examined how their narratives were constructed, if/how these narratives were shaped by a broader societal narrative, if/how these

narratives may prevent survivors from disclosing their experience, and if/how these narratives were adjusted if the survivor chose to disclose.

# Reflexivity

Aligned with feminist research methodologies, I recognized that any research interpreting the meanings and experiences of participants also contains the positions and perspectives of the researcher. Riessman (1993) echoed this idea when highlighting five levels of representation in the research process. Through analysis, the researcher interprets and creates meaning, choosing the pieces of narrative that appear meaningful and weaving that meaning into the research project. This study was no different, and throughout the process, I strived to remain constantly reflective and mindful of the experiences, standpoints, and assumptions I brought with me to this project.

I personally identify as a queer. My current and previous involvement in the queer community had given me a prior introduction to concepts discussed in this study. In fact, my interest in this topic stemmed from my awareness of heteronormative power structures and the lack of resources for queer and transgender communities. I also have had personal experience with homophobia and witnessed experiences of transphobia prior to this study. These experiences along with my continued participation within the queer community could risk biasing my data.

In addition, I also identify as white and genderqueer. My experiences with my race and gender identity also provided a specific standpoint from which I understood and interpreted my data. To address this potential for bias, I practiced constant reflexivity of my marginalized and privileged identities and positionality throughout the data collection

and analysis process. I also recognized that this study is a co-construction, and it ultimately reflects my voice, as well as the participants' voices.

#### CHAPTER IV

### FINDINGS

For this study, I interviewed transgender and nonbinary survivors of intimate partner violence to better understand and answer the following research questions. This chapter presents the results of this study.

# **Research Questions**

The following research questions guided the interview process:

- 1. Following the violent episode(s), what obstacles or aids do survivors of IPV with non-normative gender identities face when deciding whether or not to disclose their abuse to others?
- 2. How does an individuals' gender identity combined with their knowledge of the formula story for IPV impact a survivors' experience with disclosure or non-disclosure?
- 3. To what extent do other social identities, such as race and class, affect either willingness or reluctance to disclose abuse?

# **Participants**

My sample consisted of nine transgender survivors of intimate partner violence, though participants represented a range of gender identities within this term. One participant was a transgender woman, three participants were transgender men, 4 participants were nonbinary and/or agender, and one participants was bigender. Please

refer to Table 1 for a breakdown of participant gender identities and pronouns. While these categories appear clearly defined, some participants acknowledged that this identity is shaped by context.

Table 1

Demographic Information

Pseudonym	Gender Identity	Pronouns
A	Man/Trans Man	He/him/his
В	Transgender	Ze/hir/hirs
D	Nonbinary	They/them/theirs
J	Transgender/Nonbinary	They/them/theirs
11	Agender masculine presenting	Name only
K	Bigender/Transwoman	She/her/hers
M	Transwoman	She/her/hers
N	Gender neutral/Nonbinary	They/them/theirs
R	Transman	He/him/his

K, who is bigender, noted, "If I could do it all over again knowing the science, knowing that, you know- if I could go back to being twelve today with today's new medicine and today's technology, would I transition into a woman? Probably." Instead of transitioning, her relationship with her children, whom she is not out to, shapes her

gender identity. Though K is bigender, she "think[s] of [her]self more as a woman than as a guy." Meanwhile, B, who is transgender, mentions that hir gender identity has been "a little bit of a contention."

I kind of saw the rest of the culture, and I was like, "Alright. I guess I'm transgender. Alright. Cool. Whatevs." Then I went to [an agency] about a year ago, and I needed to go there so I can get information on doctors and what not. That's when I was talking to the trans coordinator, and she actually labeled me as gender fluid. She actually said I would fall under transqueer. I kind of just smiled and nodded, and I was like, "Okay." But for all intents and purposes, if you ask what I am, I'll just say transgender because the whole gender theory thing- I just can't. I guess I can apply to other people, but to myself I just don't quite understand, so it's like I take the easy way out. So I'm just transgender.

Though B identifies as transgender and a man, others have placed additional gender identity labels onto hir. This is also the case with JJ who is an "agender, masculine presenting person" but has often been treated as a trans man.

JJ's identity also notes an important distinction between gender identity and gender expression. Amongst the four participants who identified as nonbinary or agender, JJ and J both identified as more masculine or masculine presenting, N indicated they were more feminine presenting, and D explained their gender expression as more masculine within the context of their relationship. Simplified categories of "transgender man," "transgender woman" and "nonbinary" fail to capture the complexities of gender identity. Even for A, a transgender man, the "transgender" qualifier in his gender identity felt less necessary as he became more comfortable in his gender identity:

I think before [feeling proud], it was much more, "Well I'm a trans man" or "I'm transgender" or I'm much more of this kind of qualifier of being trans, whereas

now that I'm proud of my trans history or you know proud to kind of share that and to teach others and that kind of thing, I actually don't have that qualifier really so much in my head. It more feels like, uh, you know, my experience is just different. Um, so I identify more, honestly, with male and man.

In addition to gender identity, participants ranged in age from 19 to 57 years old with 5 participants identifying between ages 28 and 31. While all participants had been out of the abusive relationship for at least one year, some participants said they had been out of the relationship for many years. For N (age 20) and J (age 19), the abusive relationships ended while they were in high school. Seven participants mentioned currently being in another, healthier relationship, with one participant indicating this current relationship co-existed with the previous abusive relationship.

Six participants identified as white, two participants as people of color, and one participant as other/Mediterranean. B, who identified as other, noted that hir racial identity differed in different contexts depending on how ze was perceived:

I am perceived white, but my culture that I was raised in was different than the culture we live in. I would- how do you want to put it? Whenever I'm asked I say Mediterranean. I did not have the white privilege until I left the area, so um.. Other. I guess.

Though ze is considered white by typical American racial standards, hir family ethnicity was not granted white privilege in hir community growing up. This shaped hir racial identification.

Participants also ranged in sexuality. Two participants identified as bisexual, two as pansexual, two as queer, one as straight, and one as "all over the place." B did not

comment on hir sexuality, though ze was in a relationship with a cisgender woman at the time of abuse. In addition, four participants were polyamorous and three participants participated in the BDSM community.

When looking at social identity, it also felt important to understand participants' social identities in relation to their abusive partners. Three participants had more than one abusive partner. Of the abusive partners discussed, five of the perpetrators mentioned in this study were cisgender women, two were transgender women, four were cisgender men, and one was identified as a woman without the marker of cisgender or transgender. Only two relationships were referenced in which the perpetrator's racial identity differed from the participant's racial identity. JJ, who was a person of color, had a white partner, while D, who was white, had a biracial partner.

This demographic information shows significant gender and sexual diversity with more limited racial diversity. The diversity of gender identities also led to a diversity of experiences and understandings of their experiences, though their understanding of the formula story for IPV remained consistent.

# "A Special Type of Hell": Defining Intimate Partner Violence

At the beginning of each interview, I asked participants to personally define intimate partner violence. These definitions helped create a foundational understanding for how participants conceptualized their experiences. JJ defined intimate partner violence as "anything non-consensually done to the other person in a romantic or sexual relationship." B echoed the lack of consent, stating IPV is "pretty much unwanted stuff

directed towards you, and you told the person to stop repeatedly and the advances or insults or what have you still keep coming."

R explained that "Intimate partner violence can be verbal, physical, or emotional harassment or damage one individual inflicts upon another." B also said that it can be "mental, physical, emotional, or sexual in nature," and A echoes this as well, though he noted a common focus on physical violence:

I guess I would define it as - well so a lot of times we think of violence as being specifically physical, but I guess that when it comes to intimate partners, I feel like it can extend to- well I guess when it comes to anyone, I feel like it can extend to emotional, sexual, as well as physical. Just kind of, I guess, harm on another person's persona.

A's reference to physical violence reflected the common formula story in American society. In addition to being asked to define IPV, I also asked participants how the "average American" might define IPV. This question illuminated if there was any awareness of a central formula story in society, and it also highlighted any discrepancies between individual and societal definitions of intimate partner violence. In response, six participants indicated a focus on physical violence. D said the average American would "usually think it's someone hitting someone else." Similarly, JJ said it would be defined as "probably physical violence in a dating or marital relationship." M also echoed a similar definition, though she noted this definition leaves out important pieces:

You know, a lot think of when you get hit or the person's just- I don't know. Most people think it's very physical violence, and there are a lot of cases that it's just physical violence, but more- 9 times out of 10, it's things that are said- the things that are done that really sting the most. Those are the things that are truly

violent. Most people haven't experienced that, so they think: man hits woman. Woman hits man. That's the true nature of violence. Words don't ever hurt.

A also mentioned the need to integrate other types of violence into the definition, as well as to broaden the definitions of survivor and perpetrator:

Well I think that the average American would define intimate partner violence as probably in a heteronormative mindset of a male harming a female, and probably would often limit it to a physical and possibly sexual manner and maybe not necessarily integrate the emotional aspect. So yeah, I guess I would- I don't think that we often think of same-sex or same-gender couples as having that aspect, and I think we also often don't think of women as being the perpetrators.

In fact, when asked to describe the person who the average American would believe is most affected by IPV, all but one participant named a woman. For B this response came quickly: "Well gender is easy. Um it'd be- umm women." While most participants mentioned a woman, they differed in their description of the type of woman. N and J indicated it would be a white woman, while JJ said "cisgender straight women are the most affected." D echoed the mainstream formula story more closely, saying "a cis woman being physically beaten by a cis-man in a heterosexual relationship," and K had a similar response: "when you hear domestic violence, um, you know- an abusive husband beating his wife because she didn't have dinner fixed when he got home from work or whatever."

These responses show a difference between how individual participants conceptualized IPV and how they perceived mainstream society would conceptualize it. While they recognized various types of IPV (including emotional, physical, verbal, and

sexual), they believed society only focuses on physical violence, especially physical violence that victimizes women. This belief was consistent with the formula story of IPV where a male perpetrator enacts physical violence on a female victim (Loseke, 2001). Though these questions highlight a discrepancy between personal and societal definitions of intimate partner violence, the study further sought to determine if this discrepancy affected decisions to disclose experiences of abuse.

# **Barriers to Disclosure**

While coding transcriptions, I identified three themes regarding barriers to disclosing abuse. These themes included transphobia, minimization of abuse, and threat to outness. Each theme also contained multiple subthemes.

Transphobia. Throughout the interview process, six out of nine participants discussed anticipated and experienced transphobia throughout their lives, and five out of nine participants listed anticipated or experienced transphobia as a reason not to disclose their abuse. When participants discussed their abuse, many feared it would require revealing their transgender identity, and they discussed how others would react to their gender. According to M, "trans people, you know, are a joke to most people." Many participants feared that transphobia would cause negative interactions in interpersonal relationships and within larger institutions. Four participants described transphobia amongst family and friends as a barrier, two participants described transphobia in the legal and criminal justice system as a barrier, and two participants discussed transphobia in other social institutions. In addition to external instances of transphobia, four participants indicated that internalized transphobia served as a barrier

*Transphobia in interpersonal relationships*. Amidst the five participants who cited transphobia as a barrier to disclosure, all five participants discussed transphobia amongst family and friends. This barrier manifested in multiple forms. Some participants expected family members to further invalidate their gender identity, use transphobia as a reason to reject and ostracize participants, victim blame participants based on their transgender identity, or deadname and misgender participants.

Some participants had past experiences of transphobia, amongst family and friends. These past experiences gave them an ability to predict how family members would respond to a disclosure of abuse. For example, JJ says, "I didn't tell my family what happened with me and her because my family refused to accept my gender identity, and I was afraid they wouldn't because of the abuse." Because JJ's family had not accepted JJ's gender identity in the past, JJ feared family members would use those abusive experiences as reasons to invalidate JJ's gender identity further.

K described a hesitancy to disclose for fear of how her kids would react to her gender identity. She says, "You know, I had kids. I wanted to keep their respect and love. Fear of rejection, I guess goes back to that innate fear of not doing anything to get excommunicated from the clan." For K, transphobia within her family risks her being rejected by her kids who are a source of community for her. She compared feelings to those of hunter-gatherer times where acceptance from "the clan" was essential for survival.

M also indicated a fear of rejection when describing her hesitancy to disclose her abuse to a close friend. Because this abuse began when M came out to her partner, disclosing the abuse also involved coming out as transgender to her friend. M said:

I didn't want to lose her too. I didn't know how she was gonna react. I mean, she had always been queer friendly. She had always- she was always a supporter so it was like 90% "I'm good- I'm not worried," but that 10%, especially with someone that you could- I mean, I consider her to be my sister. She is family to me. We have known each other that long. And even now, just the thought of losing her makes me want to cry. I couldn't do it. Um I was, you know- I was gambling on the fact that she was who she was to me for that reason.

Some participants also worried that their trans identity would be used as justification for the abuse they experienced. According to M, "they don't think about, you know, the- the violence that trans people go through. They go, 'Well they chose that route.' [...] You walked into it. You chose it, so accept the consequences." This idea relies on the transphobic concept that being transgender is a choice, so transgender individuals choose to face violence and discrimination. In this case, one can anticipate that disclosing one's experiences of abuse would lead to little support and validation.

A final way participants discussed transphobia amongst family and friends was through deadnaming and misgendering. For loved ones that don't support a participant's transition, deadnaming and misgendering is a common way to invalidate one's gender identity. For example, R hesitated to tell his parents because they didn't respect his gender identity. He didn't want to be in a situation where his gender identity was regularly invalidated. He said, "they didn't know how bad it was, and I didn't want to call them because they were going to make me come home right then." Though he did

eventually disclose to his parents, and he did move home, his initial hesitations proved accurate:

They disrespected me all the time. They refused to call me he. They called me my birth name. They made me wear female clothes when my grandmother died. Um, I mean they were changing my clothes, you know, to female- more gender-neutral stuff behind my back.

Though the above examples referred strictly to close interpersonal relationships, the transphobia within these relationships also affects how participants perceived transphobia within larger institutions, such as the criminal justice and legal systems. For R, transphobia within his family affected his experiences of transphobia outside of the family. These experiences then affected his decisions to contact the police about the abuse:

You know, my brother is a police officer, and he will say hey to me and everything, but emotionally, ever since I came out as lesbian and especially as transgender, he will have nothing to emotionally do with me. I mean, he will say hey and give me a polite hug, but that's about it. So if my own brother who is a police officer can't accept me, won't use the right pronouns and name, how could I trust the other cops that know him around here? And I know 3 or 4 of his buddies, and they still call me the old name. They still call me she.

Transphobia in the criminal justice system. When discussing the criminal justice system as a source of support, N said, "queer people are far less likely to come forward with information because they're very skeptical and afraid of the system helping them."

JJ shared similar hesitations around "what they [the police] would actually be able to do to help." For most who identified transphobia within the legal and criminal justice

systems as a barrier to disclose, participants shared negative past experiences with the system. Typically, these past experiences occurred when disclosing to the police initially, and the initial experiences created larger barriers to disclose to this system in the future.

Both participants who contacted the police cited rampant misgendering as a reason to avoid future disclosures. Misgendering occurred both in person during the encounter and on official police reports, and it often occurred as police stressed the necessity of using legal names and biology. For example, JJ shared an experience contacting the police and the subsequent attempt to use the police report in court:

The police told me that we needed to call me "he or she" not "they" or my name because it would confuse people too much. They at one point even told me that my abuser needed to be called "he" and I needed to be called "she" based on our bodies. When the DA got the case, they were so confused that they had no idea if I was the defendant or plaintiff because the report confused the pronouns so many times. [..] the DA literally had no clue what to do and they eventually dropped the case all together. The police made us put our non-legal birth names in the report as well as our legal names and constantly switched between which were used in the report so the DA thought there were 4 people involved.

For JJ, this interaction with the police proved to be stressful and confusing without a beneficial outcome. R reported similar stressors when contacting the cops about his abusive relationship:

To come out to the cops sucks cause you have to show your ID, and they're like, "Well I have to legally put this in that you're female." Blah blah blah. "Legally I have to run your name." Their names. And you know, both of our names are still our birth names. She had changed hers, but she is still legally male. So like, them doing paperwork then doing- you have to explain everything.

With both JJ and R, these experiences exposed the lack of knowledge about the transgender community. This knowledge deficiency paired with the bureaucratic responsibility to use legal names and biological markers can lead to distressing experiences for transgender survivors of abuse. For JJ, this experience exemplified prior hesitations to contact the police, and for R this magnified the hesitations for future police contact. While R ended up disclosing to the police multiple times during the duration of his relationship, he continuously cited transphobia in the department as a barrier, describing the experience of misgendering as "a dysphoric nightmare."

In addition to the police and court system, participants also mentioned transphobia in other legal systems. For example, K expressed a hesitancy to disclose her experiences of abuse while in the relationship for fear that she would lose custody of her kids.

If I stood up for myself, she would be gone with the kids, and no court in the world- if she divorced me and left me, you know, no court would let me see- you know a sick bastard like me because I'm strange. I'm sick. I'm, you know, a pervert.

K feared the court system would view her gender identity as a reason to deny her child custody. This fear of transphobia kept K in the abusive relationship and prevented her from disclosing her experiences to anyone since this disclosure could provoke an end to her relationship.

*Transphobia in other arenas.* In addition to systemic discrimination and transphobia within the criminal justice and legal systems, participants reported fear of transphobia and discrimination in other areas, such as the education system or places of

employment. Six participants indicated being in either high school or college at the time of the abuse. Though only two participants referenced transphobia within the school system as a barrier to disclose, these were the only two participants who identified school officials as someone to disclose to. One participant also indicated fear of job loss as a reason not to disclose since it is legal in most states to fire someone based on their gender identity. Another participant confirmed this fear through her experience losing a job due to her gender identity.

R, who was in college at the time he experienced abuse, reached out to his professors for support in his classes. Though he did disclose his experiences, he identified hesitation. "I didn't know how some of the professors were gonna react. Some of them are very liberal. Some of them are very nice. Other are close minded a little bit." This hesitation was magnified by the lack of structural support at the school.

[The school] is a very, very liberal school, but we still have our issues. Um- try to get gender neutral housing- blah blah. So I don't really talk about it on campus that much. We didn't even have a transgender student union until my last semester there.

Despite these hesitations, though, R did disclose and had a positive experience. He said regarding his professors, "Luckily the ones in my department, the ones in my academic recovery program were very understanding."

M's experiences weren't so lucky. Previous exposure to homophobic violence at her local community college prevented her from disclosing her abuse since it implied higher risk for transphobic violence:

I came out [as bisexual] during the last semester I was there. The instructors stopped talking to me. They stopped teaching me. I was on my own. Um, the other moment in time I had a gun pointed at me was at that school after class. One of the guys just pulled out a gun, walked up to me, and said, "You know, you need to not be here anymore." And I left the program shortly after that, but, you know, how can you tell people that your wife is- is berating you and beating you and throwing stuff at you because you came out as being trans to a bunch of people that would shoot you just if they found out you were gay?

K acknowledged that "not disclosing for fear of repercussion is valid." The fear of repercussions for coming out can sometimes exceed the desire to disclose, especially when disclosure poses a risk to physical safety. K also denoted financial security as a concern, and she indicated fear of job loss due to transphobia as a barrier. She explained that "with Maslow's hierarchy of needs, a job is right up there with, you know, providing housing, food, you know, the necessities of life." If disclosure of abuse risks coming out at a place of work, participants also run the risk of job loss. Both K and M reported losing a job at one point due to transphobia.

The fear of transphobia—whether in interpersonal relationships, the criminal justice and legal systems, or other arenas—creates a lot of hesitancy to disclose experiences of abuse for transgender survivors. For many, disclosure of abuse also requires a disclosure of participant's gender identity leaving participants vulnerable to judgement and discrimination. Transphobia, however, is not always experienced as an external event. Four participants indicated a sense of internalized transphobia as a barrier to disclosure.

*Internalized transphobia.* While transphobia often refers to experiences that happen external to oneself, transgender individuals may internalize these negative views

and experiences. This can create a sense of low self-worth. K described these feelings that arose as she tried to suppress her gender identity: "I didn't have that much self-respect, you know, or self-confidence because, you know, the other side of me that I was trying to cope with and deal with and put back into a box."

This low sense of self-worth can lead to a feeling of not being wanted and a fear of loneliness. Some participants reported a hesitancy to disclose because they didn't want to feel pressured to end their relationship. For example, A says "there was a piece of me that I didn't want them to tell me not to be with her because what if I never had anyone else?" JJ also says, "I thought I would never find anyone else who would want to be with me due to my gender identity."

While some indicated a fear of not finding anyone else, others reported feeling like their gender identity caused the abuse. When M's abusive partner outed her to friends and family, she began "getting all kinds of slack." In response, she said, "I just sort of lowered my head and went, 'Well I'm the person that started this. Let me just trudge through it.' I guess was the mentality I had going." By coming out to her partner, M felt that she initiated the repercussions she faced and that she should just suffer through it.

Though A didn't feel like he caused the abuse, he rooted the abuse in a failure to successfully embody his gender identity. He said, "I was ashamed of it, first of all. You know, that I was supposed to be the man, right? So I wasn't kind of strong enough to, um, to control her, I guess." Because he felt his abuse indicated a failure to be a strong

man, he also felt a hesitancy disclosing since he wanted others to perceive him as a man. He noted:

I'm in the middle of my transition which is, you know, one of the most vulnerable times because you're in this position where you're sometimes not passing, or you've only just been passing, and- you know, still trying to "convince" everyone that you are who you say you are, you know? And hide it from everyone, and hide it from- you know, all of that, and so, like - so I didn't really want anyone to know, you know?

He didn't want anyone to know about his abuse because he didn't want anyone to question the validity of his gender identity.

Internalized transphobia can create a lower sense of self-worth and self-confidence. When in an abusive relationship, this sense of lower self-worth can cause participants to also internalize the abuse and blame themselves. If survivors recognize that situation as abuse, they may hesitate to disclose for fear that they'll end up alone. Survivors may also perceive the abuse as a direct result of their transgender identity or a failure to successfully embody that identity. Ultimately, internalized transphobia may cause survivors to minimize their experiences of abuse.

Minimization of abuse. In the interviews, seven participants mentioned the minimization of abuse as a barrier to disclosure. Six of these participants discussed personally minimizing their abusive experiences, while seven of the participants discussed others minimizing their experiences. The reasons for this minimization varied from internalizing responsibility for the abuse, thinking it could be worse, and not seeing

it as serious. Reasons also included the failure to understand the abusive situation in the context of gender identity, sexuality, and ability.

Minimization by self. Six participants indicated that they hesitated to disclose their abuse because they minimized the experience. Many participants did not initially recognize that their experiences were abusive. Even when they did recognize the experiences, many second guessed this recognition, either internalizing responsibility or thinking it could be worse. Others felt unsure how they could fit into the formula story of abuse survivor due to their gender identity, ability status, and/or sexuality.

All six participants who minimized their abuse also noted that they didn't originally identify their experiences as abuse. This identification process took time, and for some it didn't occur until after the relationship ended. This could present a barrier to disclose since survivors are unaware that they have an experience to disclose. For example, J explained:

I didn't talk about it like it was abuse. Does that make sense? I talked about it as if this is just the issue we have in our relationship. The same way someone would be like "Oh he left the toilet seat down". I guess in the end what I'm saying is that it took me a while to recognize that it was abuse, and so because I didn't recognize that it was abuse, I didn't talk to anybody about it.

N also noted that while they talked about their experiences with friends, they never recognized nor identified the experiences as abuse. It wasn't until they were exposed to more information about IPV and PTSD that they were able to recognize their experiences. N stated:

I started telling like my close friends kind of like whatever was going on was whack, but then I didn't actually define it as violence until my senior year of high school, and I was starting to look at Tumblr feminism and learn about like loving yourself and that what when I actually defined it as violence.

For N it also took the recognition of PTSD symptoms and "knowing that PTSD has to result from something and this is what it was" to understand their experience as violence. While N experienced different types of violence, this storyline held true for many participants who experienced mostly emotional violence. A began recognizing PTSD symptoms in his response to drinking habits. Though his current partner didn't drink often, he felt triggered because his past experiences of verbal abuse occurred while his partner was drinking. D also didn't define their experiences as abuse until they processed their experiences of PTSD afterwards. Until participants were able to recognize their experiences, many felt like they had nothing too serious to disclose. As J said, their experiences are no worse than those who's partner "left the toilet seat down."

Even with those who began to recognize problems in their relationships, these feelings may be minimized as they internalize responsibility for the abuse. This can be seen through M's statement that she just "lowered her head" because "[she's] the one who started this." For J, they felt their experiences indicated they were a "bad girlfriend," and they didn't want others to perceive them as one as well. D also thought their experiences resulted because they needed to be "a better significant other." D said, "I was very focused on my responsibility and what I was doing wrong. Um, so I very much thought that that was it. She was right, and it must be me, and I must not be doing things

right." By holding oneself accountable for their abusive experience, participants again have little reason to disclose.

Another mechanism to minimize abuse is through thinking it could be worse. The "worse" often indicated in this thought refers to physical abuse. For example, though A recognized his experience as abuse, when asked if he would disclose to certain friends in the future, he said "I think there's also a piece of me that's like, 'Well, you know, it's not like she was, you know, smacking me around or, like, you know, that kind of thing.' The levels of abuse." His reference to levels of abuse underscores his experience as a lower level, perhaps no longer necessary to discuss. He continued to say:

I guess there's just this piece of me that's also just like, well it just could have been so much worse, and who am I to call it this when other people go through, you know, these other, just, horrendous things, that, you know, that happen.

In this instance, A began to rethink his experience. Though he identifies his experience as abuse, which was a criterion for participation in this study, he began to question the validity of the identification. Other participants also questioned their experiences of abuse because it could have been worse.

Additionally, participants minimized their experience to be more congruent with their various social identities and the assumptions society places on those identities. For some participants, especially some more masculine identified participants, the incongruence between their gender identity and survivor status caused them to minimize their experiences. These findings will be discussed in more detail in response to the second research question. For other participants, their ability and/or their partner's ability

status altered their perception of abuse. For another participant, identification within the BDSM community complicated the ability to identify experiences of abuse. These last two findings will be discussed in more depth in response to the final research question.

Minimization by others. Seven participants discussed hesitancy disclosing due to the minimization of experiences by others. For some participants, this was a perceived response that prevented disclosure while for other participants this was an experienced reality from past experiences with disclosure that shaped future decisions to disclose. This minimization included not recognizing the abuse as a serious problem. It also included not recognizing it as abuse based on commonly held perceptions of gender identity, sexuality, and ability status.

Two participants indicated a hesitancy to disclose because others would not recognize their abuse as a problem. For J, this was a perceived hesitancy based upon their parent's typical views on relationships. They said, "my stepmom, always said that there's problem you have to fix to make yourself a healthy relationship regardless with what's going on, so I had equated it to that." Though their stepmom did not make this statement in reference to J's relationship, J internalized the statement to apply it to their relationship. Again, J did not want to disclose to their parents for fear they'd be perceived as a "bad girlfriend." Instead of the experience being seen as abuse, they believed their stepmom would view it as a fixable problem. J's perception of their parent's response interfered with disclosure.

For M, their decision to disclose was partially shaped by others' responses to their experience. When M's wife outed her to mutual friends, M received an outpouring of

transphobic comments rather than support. In fact, three participants indicated losing friends because they weren't seen as abuse survivors. For JJ and J, mutual friends believed the perpetrator rather than them. This rejection from loved ones can affect how individuals decide to disclose in the future. Also, for M, her experience of her parents minimizing her abuse allowed her to further minimize her experiences as well. Looking back, she said:

Even my own parents were like, "No, no, no. Stay and work it out." And I mean, like, this woman was, like, throwing shit at me at night. She's threatening to kill me. She's threatening to, you know, torture me. It- it was bad. It's interesting how much your mind- the things you tell yourself when you're in a situation.

Shaped partially by her parents' response, M had further rationale to minimize her abuse. Conversely, when M finally told a close friend, the friend's response of urgency and support helped M reframe her perceptions. I will discuss this aid to disclosure later in the results section.

Again, like the last subtheme, additional barriers were identified related to gender identity, sexuality, and ability status. The fear of others' perceptions of gender identity mimicked those expressed by individuals who minimized their own abuse. This will be discussed under research question two. Participants also hesitated to disclose fearing judgement and minimization based on common conceptions around BDSM and polyamory. Finally, participants noted their ability status or their partner's ability status as reasons why others may minimize the abuse. Again, sexuality and ability status will be discussed more fully with a discussion of the final research question.

Threats to outness. Coming out as transgender and/or transitioning into their gender identity can have a significant impact on relationships, job security, and other sources of stability. K described transitioning as a necessity. She said, "People often reach points of critical mass, where they have to transition or they'll die. They just can't live that way anymore." Despite this, both coming out and transitioning can pose risks. M summed up these risks by saying, "you should not be ready to transition until you're willing to lose everything because you most likely will."

In this transphobic society, coming out and/or transitioning may not always be wanted or attainable. Not being out, however, can have a significant impact on whether a person chooses to disclose their abuse. In this study, two participants were not out about their gender identity during the time of abuse. While for both, their abusive partners knew, other family members and friends did not. This created barriers unique to other participants in the study, though even amongst those who were out, another participant noted that the coming out process is ongoing and can still create hesitancies disclosing.

Being outed. For transgender survivors who are not out about their gender identity, disclosing their experiences of abuse may risk being outed. In fact, as D noted in their definition of intimate partner violence, "outing someone" can be a tactic of abuse in queer relationships. For K, whose partner was aware of her trans identity and often used it as a focus for abuse, she feared the repercussions of being outed by her partner. As demonstrated in reference to transphobia in the legal system, K feared that her partner would leave her and take the kids if she stood up for herself or disclosed her experiences. In the courtroom, she assumed her trans identity would be used against her. She would be

outed as transgender, and the transphobia in the courtroom would cause her to lose her kids. Disclosing the abuse risked being outed by an abusive partner when she didn't want to come out.

Forced coming out. Most hesitations surrounding coming out stemmed from being forced to come out, rather than being outed by someone else. Because the abuse may involve one's gender identity, disclosing and explaining the abuse to someone else may require explaining one's gender identity. Such was the case when M discussed coming out to a close friend about both her gender identity and experiences of abuse.

For participants, who were not out, this meant disclosing abuse could require coming out when one is not ready which could prevent disclosure. J noted how staying in the closet was a priority for them: "At the time which I was ready to tell people, like, I didn't care what happened or what people said as long as I didn't have to come out of the closet." In this scenario, disclosure was only an issue if it required coming out. At the time, no other barriers were significant enough to prevent J from telling others.

Further along in the interview, J discussed their hesitancy to discuss the abuse with their counselor because they didn't want to be encouraged to break up with their abusive partner. Again, this hesitancy to disclose—and thus be told to break up with their partner—was rooted in a fear of coming out:

I'm sure she [the counselor] was aware of me being in an abuse relationship, but I wasn't trying to hear "Break up with him" because I felt like if I did break up with him, then people would know that I wasn't a woman, and people would know that I was gay, and people would know that I was a bad girlfriend. Like I just didn't want any of those things even though it had gotten to the point where I didn't want

him. But with all of those social ramifications, it felt like I was trapped-like there was nothing I can do to fix the situation I was in.

While coming out was a more prevalent theme for participants who were out to few during their abusive relationship, R, who "openly identifies as a transgender male [..] online and everywhere else", also discussed the difficulty coming out. Since his legal identification did not match his gender identity, R was forced to come out every time he contacted the police about his abuse. This was a difficult experience because he was "afraid to come out," as well as "afraid of what the cops will think." The hesitancy in these scenarios only worsened as his experiences with the cops involved regular misgendering. Even in supportive environments, such as the liberal arts school R attended, "it [coming out] still is very emotionally hard to do."

### **Facilitators to Disclosure**

While participants indicated various barriers to disclosing their experiences with abuse, all participants did disclose their experiences at some point in time, though the degree of disclosure and recipients of the disclosure varied. Since some instance of disclosure was common, I found it important to identify facilitators as well as barriers to disclosing. Throughout the interview process, participants named interpersonal support, structural support, a feeling of urgency, and a desire to educate others as facilitators to disclosure.

**Interpersonal support.** Eight participants talked about the important of institutional support when disclosing their experiences, and all eight disclosed their experience primarily to those close to them who support their trans identity. This could

include cisgender friends who were outwardly supportive of them and their identity. Five participants also said they disclosed their experiences to those with a shared trans identity, either transgender friends or within a transgender support group.

During our interview, M discussed the necessity of disclosing only to transsupportive individuals: "when you talk about it to people afterwards, anyone you do talk
to, you would have already had to have vetted them as being incredibly queer-friendly,
incredibly trans-friendly. I mean, they had to have hit both marks." When she told her
close friend, she assessed this criterion beforehand. Relieved that her friend was queerfriendly, though uncertain that her friend was trans-friendly, she hesitated to discuss her
experiences with abuse. After her friend showed support for her trans identity, the
disclosure was easier.

Similarly, K noted the effect of being in a trans-supportive, online environment:

I had found people online that I met as K online, and who knew I was transgendered and cared and appreciated me for who I was. It just kinda convinced me that there are people that can love me for who I am and appreciate me for who I am.

K first disclosed her experiences to members of this online community, who had supported her trans identity. Most participants indicated that being accepted was important in their decision-making process to disclose, and the uncertainty of this support caused hesitations. Even amongst participants who did not indicate this as an important facilitator, the participants mostly discussed disclosure to trans-affirming friends or

family members. Lack of this support by certain friends or family members created a barrier to disclosure.

In addition to being trans-affirming, 5 participants disclosed mostly to others who share a transgender or non-binary identity. For example, J initially told a friend with a non-binary gender identity about their experiences with emotional abuse. In their interview, they note that they didn't tell anyone else until much later when the abuse got physical. R, K, and A disclosed their experiences in transgender support groups. In this environment, one can assume their gender identity is supported.

For A, who attended a group at a conference designated for trans masculine survivors of IPV, this support group proved to be a healing experience:

They had a group of trans man who were masculine identified or masculine of center who had been in relationships with intimate partner abuse. That's when I actually realized it wasn't- I wasn't the only person kinda having those feelings of-kind of not leaving because you think that that person- that you're never gonna have anyone again. And not thinking that because you're trying to portray a certain personhood or certain portrayal of gender.

**Structural support.** Alongside interpersonal support, structural support also proved to be a facilitator to disclosure. Five participants discussed disclosing experiences to a counselor, and one participant discussed disclosing their experience to school administrators.

While participants sought counseling for numerous reasons, five participants talked with their counselors about their experiences with abuse. For M, B, and D this disclosure occurred after the abusive relationship ended, and it served as an opportunity

to work through and process the emotions they held from this experience. R and K both sought counseling services during the relationship, and they noted that this was a valuable experience. Also, as noted before, some participants went to support groups which can serve as a structured form of interpersonal support.

R was the only participant who mentioned school as a source of structural support. Attending a university during the time of his abuse, he reached out to university staff for support. Talking about this experience, he said "being in an academic program was a really big help for me because they got me counseling, and, you know, they got me that emergency housing." Because universities often have different services in place for students, and R attended a university that he identified as "LGBT friendly," he disclosed to university staff, and he was then granted access to other forms of structural support, such as counseling and emergency housing.

R also talked about structural support within the police force as a facilitator to disclosure. During his abusive relationship, R lived in two different cities, and he had to call the police in both cities. Though he hesitated to call the police in both, he felt more comfortable in one where he felt "cops are trained to deal with transgender individuals." He also noted that "half of the cops are LGBT" in this city which helped facilitate disclosure, especially when he perceived one responding officer as a lesbian.

Participants have, therefore, deemed structural support an important facilitator to disclosing experiences. Knowing that structural support was in place, whether in the school system or by attending counseling, facilitated participant's disclosure to those within these structures. For counseling, this disclosure also allowed participants to

process their experiences, which for some aided in closure, the minimization of negative emotions from the abusive relationship, and the ability to process this experience with others, such as current partners.

**Sense of urgency.** While previously I discussed the importance of support as a facilitator to disclose, some participants disclosed their experiences regardless of whether they would be supported. These participants noted a sense of urgency as a facilitator to their disclosure. Such a sense of urgency was often sparked by a threat to the participant's physical wellbeing.

Two participants disclosed their experiences after their physical safety was threatened. For R and JJ, death threats by the abusive partners caused them to contact the criminal justice system. R described one situation where he felt he "had no choice" but to call the police:

When I tried to break up with her one time, she put a revolver in my face because she was threatening suicide. Then she was like, 'Well I'll just take you with me.' Blah blah. And then when I decided to call the police, and I had them on the line, she put the gun down and said, 'I was just joking. You're not even worth it.'

While R had experienced physical abuse prior to this scenario, this threat to his life posed a different sense of urgency. JJ also described an experience where contacting the police felt necessary despite hesitations. Because JJ's life felt threatened, JJ felt more urgency to disclose the abuse, even though JJ also had hesitations and fears contacting the police:

I wasn't sure if I wanted to tell the police, but the only reason I did was because she found out I had told my current partner about the abuse, and she threatened to kill me, and I knew I needed a restraining order. When I went to the court house to file for a restraining order, though, the clerks told me I would be more likely to get a restraining order if I had filed a police report so because I feared for my life I filed the report in the hopes it would help with the restraining order process.

In addition to feeling threats to one's life, participants also articulated a sense of urgency tied to emotional and physical well-being. Three participants reported being "overwhelmed" by the abuse, and R repeated the phrase "I had no choice" throughout the interview when asked about disclosure. When R discussed his initial reasons for disclosure, he said:

Cause I had to. I mean- I was literally getting 4-5 hours of sleep per night. I'm failing everything. Even with my job, I wasn't falling asleep at my job, but I was making careless mistakes like burning myself on the grill. Every aspect of her controlling me, and no sleep, and the stress of life, and literally breaking down and crying every single day- it had so much of an impact on my life. It affected how I functioned

In this situation, R felt urgency to disclose his experiences of abuse because they limited his well-being and ability to function in day to day life. This had physical consequences, such as work injuries, as well as emotional consequences, such as stress and "breaking down" every day. This can create a sense of overwhelm that makes disclosure a necessity. D also said they disclosed to their nesting partner because they felt "overwhelmed," and J mentioned the need to disclose for the sake of their mental well-being. J said:

The gaslighting got so bad to the point where, like, if I didn't tell anyone, I would have lost it. If I didn't confirm that it wasn't just inside my head, I would have lost it. It was basically like my mind had escalated it to the point where this was a situation where- do I keep my sanity or do I lose it?

Whether related to physical, emotional, or mental well-being these participants associated disclosure with a sense of urgency, stating they (in R's case) "had no choice" or (in D's case) they "felt overwhelmed." In response to death threats R and JJ disclosed to the police, who they shared a hesitancy in contacting. In the other scenarios, participants felt an urgency to disclose, but they chose to disclose to people or structures that they previously identified as supportive. For J, this urgency resulted in their disclosure to their non-binary friend, for D this urgency resulted in their disclosure to their nesting partner, and for R this urgency resulted in their disclosure to university staff. This suggests that facilitating factors may combine to affect if participants disclose and who they disclose to.

Educating others. Three participants discussed wanting to educate and help others as a reason for their disclosure. This desire to help and educate seemed to facilitate talking about their experiences, both to me and to others. For B, this disclosure served to educate the general public that men could be abused. Ze also hoped hir story might reach other men who are afraid to speak out. For J, this disclosure served to reach other survivors so that they could seek help. M also wanted to reach survivors, and she discussed her experiences disclosing to other trans survivors.

During the interview, B stated that ze felt mostly comfortable sharing hir experiences. Ze said, "there's other people that I'm close with that in passing if it comes

up, ya know, I don't mind- I don't have the shame that's usually associated with it." In fact, throughout the interview, B shared multiple instances of disclosing hir experience. Some of these experiences were described as ways to educate the general public about IPV, especially the notion that men could be abused. For example, B shared one particular experience in which his anthropology class was discussing IPV, and a male student expressed disbelief that men could be abused. B shared hir experience to quell this disbelief and educate this student along with the rest of the class. B said ze didn't have a problem disclosing hir experiences "whenever an education opportunity would come up." Ze also hoped that this could help survivors identify and seek help for their experiences. B explained:

Because I am so masculine, because I am everything society thinks would not be subjected to abuse, all I could think about, ya know, is, when I look into a room, how many of these guys are getting abused and wouldn't say something? [...] The idea for me that boys can be abused never seemed foreign. I don't have that ingrained encultured shame that boys have to carry in society. The other reason that I was so open is because I'm very open with my trans status, so I wanted people to realize, ya know, this also can happen in the trans community.

J also discussed a desire to reach out to others. During my interview with them, they discussed their decision to participate in this study which is, in itself, a form of disclosure. J said:

I realized that other people might feel this way- Other people might be in relationships where this is the case. And so-like, it made me more so wanna talk about it because the things that [my abusive partner] made me go through I wouldn't wish on anyone.

In this case, helping unknown others served as a source of courage and inspiration to disclose and to participate in this study. B also talked about hir decision to disclose in order to help a significant other who was also in an abusive relationship at the time. B used hir experience to encourage hir significant other to get help. B explained:

She blamed herself, and that's what really got me- that she would blamed herself for it. [she thought] She was too weak, and she let it happen. I think that's her being coerced. So finally- I was like, 'Okay, let's sit down. Let's have a talk. I need to tell you stuff.' And I figured the only way that she could even start to heal was like forcing her to see, ya know, it's not because you're weak that this happens.

Likewise, M also said she has disclosed her experiences to help abuse survivors. She discussed her participation in a project to provide emergency assistance for transgender individuals in need, including those who are survivors of IPV. Below she discussed how she uses her story to comfort survivors and give them hope for the future and how, in turn, this provides help for her:

I started being more open with people that are coming out of really bad situations about what happened to me, and, I mean, I'm in my soccer mom looking SUV. We're going to our house, you know? I'm looking alright. I'm doing alright. And to come from where I was and be able to pass that to people even in just a private intimate setting. You know, they're in my car, I'm traversing them, and they just left shit, and I'm like, 'Let me talk about my shit, and let me pass some advice about how I got through it.' That's not only been helpful for them but been dramatically helpful for me as well.

**Summary.** Overall, participants discussed multiple facilitators to disclosing their experiences. There included interpersonal and structural support, a sense of urgency, and a desire to help and educate others. These facilitators often worked together, and when

combined, they created a scenario which fostered disclosure. Sometimes these facilitators helped participants overcome particular barriers to disclosure, such as when participants felt a sense of urgency stemming from a threat to safety. These barriers and facilitators often occurred simultaneously. In the next section, I discuss barriers specifically related to gender identity in the context of the formula story for IPV.

# **Lived Reality vs Formula Stories**

In the interview, participants were asked how much their gender identity affected their decisions to disclose, and many participants noted a hesitation to disclose based on their gender identity. Often this hesitation highlighted the discrepancy between participants' gender identities and the formula story for IPV, and this hesitation led to multiple outcomes. For some, this discrepancy prevented disclosure, as some participants tried to justify their identity as a survivor within the framework of the formula story, and for others, participants challenged this formula story while still recognizing their survivorship. Participants also noted a more complicated relationship between their gender identity and their formula story where gender perception may have had more significant of an influence. How some participants disclosed or chose not to disclose reflected an understanding of how others would perceive their gender identity rather than how they actually identified. For these participants, gender identity and gender perception were different.

Formula story and nondisclosure. As discussed previously, multiple participants both minimized their experiences of abuse and/or believed their experiences would be minimized by others. While they noted various reasons for this, one common

reason rested in the underlying assumptions rooted in their gender identity or their partner's gender identity. This was only discussed for masculine identified or masculine perceived participants.

As mentioned before, the formula story for intimate partner violence indicates that a man is abusing a woman. When asked about how the average American would define intimate partner violence, this formula story was regularly invoked. For masculine identified participants, this story left them without a way to understand or communicate their experiences with abuse. For A and JJ, this initially made it difficult to identify their experiences. A describes his experience internalizing the abuse because he wasn't "man enough." He noted:

Especially for people, I guess, who live kind of or who feel more on the binary, I think there's more pressure to kind of fit that masculinity or fit that femininity, and with that there are, you know, men don't get abused, and that kind of feeling that society teaches you. So if you're a male, and you're being abused, then, you know, you're just not man enough or you're any number of things, you know. You're certainly not going to say anything to anyone about it.

A identified the gendered messages given to individuals by society. One such message is that men cannot be abused. He also noted a belief that individuals who live within a binary gender may be more likely to internalize these messages. For him, this message made it difficult to understand his abuse, and even when he did understand, he felt uncomfortable sharing this with others. Not only did he recognize the formula story in society, but he assumed that most people he disclosed to would as well. Since he didn't fit this story, he felt hesitations disclosing.

Similarly, JJ and B discussed these hesitations telling others. They both recognized that the formula story doesn't make their survivorship illegible, and they even shared a worry that they would be identified as the perpetrator. B shared this one when discussing disclosure to hir mom's side of the family:

My ultimate reasons for hesitancy is how my mom's side views men and their obligations to the women they're with, and that it would be assumed that I laid hands on [my partner] in like retaliation or even self-defense. I mean that-hitting a woman is worse than a woman hitting a man, to them.

JJ also noted, "I felt if I had told someone what happened I was going to be seen as a bad person because everyone always blames the "man" as the abuser." Because JJ was more masculine identified, JJ feared people would accuse JJ of being the abuser. JJ also noted a fear of being dismissed because of JJ's trans identity:

As far as friends go I don't tell them unless I feel I can really trust them because I am afraid of being denied my survivorship as an agender trans person because I am not a woman. A lot of my friends tend to talk about survivors only as women and not as trans people or men.

In this scenario, survivorship is reserved solely for women. JJ worried that not identifying within this narrow lens of survivorship would cause others to deny JJ's experience. In addition to JJ's gender identity, JJ also noted that JJ's partner's gender identity made JJ's survivorship less legible:

No one believed I was being abused because I was the masculine presenting one, and she also was a completely different person in public. She was everything society tells us women are supposed to act like when she was in public. Shy, quiet, reserved, submissive. My mutual friends did believe I was abusive because

she used to tell them she wasn't strong enough to hurt me and she was so afraid of hurting anyone. She was 6 feet 4 though to my 5 feet 2 and was roughly 60 pounds heavier than I am. I also believe the mutual friends believed her because she fit the stereotype society gives us about women being abused. She passed very well and you couldn't tell she was trans by looking at her so I think her friends had the stereotypes in their head that women who act like she did are the ones who are abused.

In this excerpt, the combination of JJ's gender identity and JJ's partner's gender identity led friends to believe that JJ was the abuser rather than a survivor of abuse. Because JJ was masculine identified, JJ's friends believed (as the formula story describes) that JJ must be the abuser. This belief was further validated by the gender identity of JJ's partner. While JJ didn't fit the role an "ideal victim," JJ's partner did. As JJ said, friends had "stereotypes in their head" about who gets abused in relationships, and because JJ's partner fit this stereotype—being a shy, submissive woman—she was assumed to be the survivor of abuse. These experiences clearly indicate that the formula story played into some participants experiences with abuse, especially for masculine identified participants.

### Conforming to the formula story.

As Shakespeare said, the world's a stage, and to be accepted- which is a primal need that goes back to, you know, the earliest days of man whereas if you were in a tribe, say in the Stone Age, and you didn't perform, and you were excommunicated, that meant death cause very few people back then could survive by themselves because the sheer number and size and ferocity of the predators that are there- I think, is drilled into our DNA, our innate sense of survival. And that's why so many people that, when they figure out who they are, don't change. Don't be who they are.

In the quotation above, K explained why many transgender individuals do not come out about their gender identity. For K, her desire to be accepted by her pack, such as her children, fit into this explanation. K noted throughout the interview many ways through which she conformed to masculine gender norms to be accepted. Similarly, some participants discussed conforming to the formula story of IPV in order for their experiences to be accepted. R's experiences served as a vivid case study for this purpose.

Throughout the interview, R repeatedly brought up his biological sex to explain and justify his survivorship. In particular, he shared a story where he had to contact the police. Because he was a male and because of his partner's ability status, he was forced to leave the house, though the police tried to acknowledge his survivorship through a denial of his gender identity. R explained:

I told her everything, and she was like, 'Legally, you know, you are the female and she is the male, but you know, since she has all the medical issues and she does identify as female and you do identify as male, I'm going to have to ask you to leave to give you all a break. You know since all these factors.'

At another point R explained that his gender identified affected his experiences. He said:

Yeah because I mean the cops knew everything legally. They did address that. They're like, 'We know you are legally this and you are legally that, but we have to, you know, tell you to go because of certain things xyz.'

As R shared these experiences, he took a stance that appeared defensive of the decision made by the police. While it didn't appear fair for him—the survivor—to leave for the day (which made him temporarily homeless overnight), he felt comfort in

knowing his survivorship was recognized, even though this recognition entailed a denial of his gender identity. For the police, his survivorship was possible due to his biological sex, along with the biological sex of his perpetrator. R did not feel the need to address this focus on biological sex, and he talked about this experience as if he appreciated the cops recognizing his survivorship. This differed from other stories R shared, such as seeking healthcare, where he had spoken up when professionals minimized or ignored his gender identity.

R also invoked the biological sex of his partner in order to justify his experiences. Because his partner was a trans woman, others questioned the validity of this scenario as abusive. R described these scenarios, saying, "I mean some people were like, 'Dude, you're gonna let a girl beat you up?' No here's what is going on. She's also trans. She's six foot two. She's four hundred and thirty pounds." In response to a critique of his experience which invoked the formula story of IPV (i.e. "you're gonna let a girl beat you up"), R used his partner's biological sex to prove she can be a perpetrator. By pointing out the she is transgender, he implied that she can still have masculine qualities associated with a perpetrator. In other words, 'she is not like the other girls.' To further justify this, he described her physical body to explain how it can physically overpower his own.

R's story depicted the clearest example of conformity to the formula story for IPV in order to make his experiences legible. JJ, too, discussed JJ's partner's physical size in order to justify the abuse, though JJ did not question her gender identity. J also noted conforming to a feminine gender identity by failing to disclose particular experiences

with abuse that used their gender identity against them. This, however, was to avoid being outed more than it was to be seen as a survivor. More commonly, participants were selective in who they disclosed to, trying to only disclose to those who they assumed would support them and recognize their survivorship. When they felt their gender identity combined with perceptions of the formula story might deny them survivorship, participants often chose not to disclose.

Challenging the formula story. Two participants, B and J, indicated times where they actively challenged the formula story for IPV. Often this was in the context of helping and educating others. B, who mentioned that he would disclose his experiences whenever he found an opportunity to educate, also discussed that he would reinforce his masculinity to further break common conceptions of IPV. This action was actively intended to challenge the formula story. B explained, "For the most part I would make it a point to kind of reinforce my masculine identity before I told people—just to help with the whole idea of, 'it doesn't matter how masculine you are. It can happen." B wanted to disclose in a way that proved men could experience abuse too.

While J didn't discuss actively and intentionally challenging the formula story, they did invoke experiences and feelings that ran counter to this story. In one example, J acknowledged they were not the "ideal victim" yet argued this doesn't undermine their survivorship. They explained:

People think that when we're coming out about IPV, we're, like, trying to be completely innocent, ya know? And that's not the case. I know there's some things that I need to work on with communication. I know that, like, I make decisions too fast for normal people- neurotypical people- to keep up with sometimes

because I'm just hyperactive. But even though that I'm aware that those are things I need to work on, it doesn't excuse the fact that [my partner] hit me. It doesn't excuse the months of emotional abuse that I went through.

In this excerpt, J confronted the validity of the formula story and the ways it is used to discredit those who don't fit this role of "ideal victim." J also challenged the formula story by invoking empowerment and anger instead of helplessness. When their partner became physically violent, they returned this violence, and instead of feeling helpless, they channeled their anger as a source of empowerment to disclose. J said:

Because once I started to realize that it was abuse and once he hit me, I was able to channel my feeling of hurt and anxiety into anger. I know anger is a secondary emotion, but sometimes it's a useful emotion, and me being angry I was able to be like, 'if you don't believe me then you're just not a good part of my life, and it is not going to bother me if you leave,' ya know?

Other considerations. Throughout the interview, other important considerations arose in response to this research question. While this question was designed to trace a simple connection between gender identity and the formula story for IPV, this connection wasn't always so simple. Through interviews, participants made clear that both outness and gender perception affect this connection between gender identity and the formula story for IPV.

In this study, only K and J weren't out during the time of their abuse; however, both indicated that their outness affected how they processed their experiences and decisions to disclose. Instead of thinking about their gender identity, K and J also approached their experiences based on how others perceived their gender. For example,

when K was asked if she had anyone she could share her experiences with, she responded:

No. That was the problem. I didn't have anybody. Other guys that I knew- it was a sign of weakness. The view is a sign of weakness if you let your girl control you, and a lot of it was after, you know- Like our neighbor friends. She was friends with women in the relationship, while I might know the guys, [..] I couldn't really say anything. You know, I didn't really want to play the weak male. You know, I had to play the part.

In this scenario, K was not thinking about how she would be received based upon her gender identity. Instead she was focused on her gender perception. Because she wasn't out, her friends would perceive her as an abused man. Because men who get abused are weak, she faced a barrier to disclosing to her friends. While this shows the gendered nature of this formula story, her response to this story is based upon her level of outness.

J's experience was also affected by their gender perception based upon not being out. When they discuss their response to the physical abuse, in particular, they described their response based upon the societal expectations for "black girls." In an attempt to clarify their process they explained:

I'm going to use the term "black girls" because it's easier to explain, but I am not saying that I'm.. Hold on.. Let me think about what I'm about to say. I am a black girl, but I am not a girl. Does that make sense?

They went on to explain, "so as black girls, we are not supposed to let things like a man hitting us happen and just let it happen. So like, when he did hit me, I hit him back, and that was the final straw."

Even though J does not identify as a woman, they were still perceived as one at the time, which affected the ways they processed their experience, acted towards the abuse, and disclosed to others. While only two participants in this study weren't out at the time of their abuse, gender perception and outness should be taken more into consideration in the future.

Though JJ was out at the time of the abuse, gender perception was still important to consider. Throughout the interview, JJ talked about hesitancies telling others for fear of being labeled the perpetrator. JJ explained this fear by explaining that men are often seen as the abusers; however, this explanation focuses on other's perception of JJ's gender, not JJ's gender identity. Later in the interview, JJ explained, "The wild thing is I didn't ID as a man at all but everyone assumed so because she referred to me as her 'man' and I am masculine presenting." JJ is actually agender. Though masculine presenting, JJ does not identify as a man, but because JJ is masculine presenting, others perceive JJ as a man. JJ's experiences with disclosure are, thus, affected by gender perception.

Regardless of gender identity, people respond to individuals based upon how they perceive the individual. While others may apply a gendered lens to their identification of abuse survivors, this lens may be based on their perceptions, rather than the survivors gender identity. For K, J, and JJ, their experiences with abuse were affected by both their gender identity and others' perceptions of their identity.

# **Intersecting Identities**

When discussing identities that can impact decisions and experiences disclosing abuse, gender identity was one of multiple identities discussed. In addition to gender, participants discussed experiences with ability status, sexuality, and race that affected their disclosure of abuse. In fact, six out of nine participants identified other identities that impacted their decisions to disclose. For most, this was a personal identity, though for some, this included partners' identities as well.

Ability status. When discussing ability status, JJ explained that "there is a very high amount of IPV that happens in disabled non-binary and trans circles." In this study, three participants identified having a health condition or disability that affected their relationship and experiences with abuse. Additionally, two participants identified that their partner had a health condition or disability. Ability status, thus, served as an addition arena in which barriers to disclosure manifested. Like with gender identity, barriers related to ability status involved the minimization of abuse by self and by others. This was especially the case for survivors with a different ability status as perpetrators tended to capitalize off their health conditions or disabilities.

For B, hir health status affected the ways ze initially perceived hir abuse:

First, I didn't take it up as abuse because it was directed towards my health. [..] When she first started, it was just about 'Oh this is so stupid. I hate that we have to come to the emergency room. I don't understand why you're so fucked up.' Stuff like that, and in a way I didn't feel like it was abuse because, as much as I hated to admit it, I felt that way too about myself.

Initially, B could minimize the abuse because it was directed at hir health. This could reflect an internalized ableism and low self-esteem related to hir health condition.

Not only was B's health used as a reason and target for abuse, hir health also made it easy to minimize these abusive experiences. JJ also identified an initial difficulty identifying the abuse, though this was because JJ's disabilities and abuse made it difficult to trust JJ's own recollection of the experience.

As a tactic of abuse, JJ's partner, who oversaw dispensing JJ's medicine for a health condition, used to drug JJ. This was often the point at which JJ was abused. JJ noted that this experience would be minimized: "She would always drug me and tell me I remembered wrong." JJ's ability status thus indirectly affected the way JJ processed the abuse, and this minimization stopped JJ from disclosing to others for a long time until JJ because aware that JJ was being given the wrong medication.

Participants' health conditions and disabilities also led to a perceived and experiences minimization of the abuse by others. For J, this had to do with their mental health status. Like with B and JJ, J's partner capitalized off of their mental illness, using it as an avenue to actively discredit their experiences. They explained, "He would say things like, 'you've seen her manipulate good grades out of other teachers. Why do you think that she wouldn't do the same thing with something like this?" Because their friends were aware of their mental illness, these friends tended to minimize J's experience and credit their disclosure to an act of manipulation.

JJ also felt that others, such as the police, would minimize the abuse because of JJ's ability status, in connection with other identities. JJ explained:

I worried that the cops would either not trust me because I was low income or would let her off the hook because she had money and was white and ablebodied and had a lot going for her at the time. My fears tended to do more with the fact that she would be perceived as more honest, hardworking and better than me to friends and cops because of race, class, ability status and her ability to speak very well.

JJ's ability status in combination with JJ's partner's ablebodiedness led JJ to fear that no one would find JJ credible. JJ's partner would be deemed "more honest, hardworking, and better" because she was able-bodied. JJ also noted through this passage that social identities do not exist in a vacuum. A combination of social identities surrounding race, class, and ability led to this fear of being minimized. Many participants noted multiple identities as influencing their decisions to disclose.

In addition to the survivor's ability status, many participants acknowledged that their partners' ability status affected the way they and others perceived their experiences of abuse. For D, their privileged identities in comparison to their partner's identities prevented them from disclosing their experiences. They said:

For a while I was keeping it secret because I was kind of protecting her. She had a lot of social anxiety. A lot of the reason it was very hard for me to admit it was abuse was because just the, um, the privilege, which between the two of us, like, she was biracial and on the autism spectrum and also has trauma of her own.

Their partner's ability status and racial identity prevented D from initially admitting that they were in an abusive situation. As the person with more privileged identities, they didn't felt the need to protect their partner, and they had a hard time believing their partner could be abusive.

R, on the other hand, recognized his partner's experiences as abusive, but her ability status led to different treatment of the situation by the cops. Because R's partner had multiple medical conditions, the police asked R to leave the premises for 24 hours, making R temporarily homeless. While the police believed R was in an abusive relationship, his partner's ability shifted the way he was treated by the police.

**Sexuality.** While none of the participants focused specifically on sexual orientation as a factor in their experiences, they did identify other aspects of their sexual identity such as participation in BDSM or being polyamorous. The lack of focus on sexuality could be because most participants were in either a heterosexual or perceived heterosexual abusive relationship. This perception could be because participants were not out (such as J and K) or because others perceived the participant as one gender despite their gender identity (such as JJ).

For JJ, M, and D, participation or assumed participation in the BDSM community shifted the way participants experienced the disclosure process. One participant had a difficult time distinguishing between experiences of BDSM and abuse, another had difficulty believing they could be abused based on their role in practicing BDSM, and another participant had difficulty being believed.

M explained how her participation in the BDSM community clouded her understanding of abuse. While discussing a scenario of abuse, she stated:

Do I explain that as being a part of the BDSM side of things? Was it too far? Was it really just his abusive, psychotic mind just wanting to torture me? and that's all it was? Was me accepting it because I really wanted to? or because I was wrapped around his finger? Because I was twisted up at the time?

This series of questions helps capture her confusion in understanding her experiences. Especially since she described this abusive relationship as involving gaslighting and mental manipulation, she was confused as to whether she can explain her experiences as BDSM or abuse.

On the other hand, D's participation as a top in the BDSM community made it difficult for them to identify their experiences. They explain, "We've had a kink/BDSM dynamic, and I was the top—the dom—and, you know, the- usually it's the submissive who's abused, right?" Because their partner was the submissive in the relationship, D had a hard time identifying their partner as a potential abuser. This dynamic also created a hesitancy to disclose, as D described, "Yeah the hesitancy to tell was definitely there in all of that. Um, being the top. Being the dom. And then being the one who was abused also." In D's understanding of BDSM and abuse that can occur within the BDSM community, their experiences didn't quite fit, and this led to unique barriers to disclosure.

In a different scenario, JJ's partner often used the label "BDSM" to minimize the physical and sexual violence JJ experienced, even though JJ did not identify as engaging in BDSM. This label, along with the stigma and misconceptions surrounding BDSM, led police to minimize JJ's experiences with abuse. JJ recalled, "The cops told me that clearly I had wanted her to rape and beat me otherwise she wouldn't have called it BDSM." Even though these physical and sexual abuse was nonconsensual, police used the label BDSM to explain away JJ's experiences.

Friends also minimized JJ's experiences of abuse, though this was due to assumptions about JJ's identification as polyamorous. JJ stated:

I think her friends probably assumed that because I was poly that I was promiscuous. [..] I was monogamous and faithful while she and I were together but I had been poly in the past. I think people have the stereotype that men are cheaters so they associated me being poly with that.

JJ's statement indicated an intersection between gender and sexuality.

Assumptions about polyamory and about men were combined to discredit JJ when JJ disclosed about the abuse. Because JJ was polyamorous, JJ was assumed to be promiscuous. In addition, perceptions of JJ's gender identity as male also led to assumptions of promiscuity. Combined, these assumptions rendered JJ dishonest, and JJ's experiences were considered unbelievable and invalid.

Overall, sexuality can refer to much more than the gender of who a person is attracted to. Other sexual identifications, such as identifying as polyamorous or as a member of the BDSM community, can shape the ways in which survivorship is perceived and interpreted. For these participants, it affected self-perceptions of the abuse, decisions whether to disclose their experiences, and how they were received by others.

Race. Racial identities of both participants and their abusive partners also affected their experiences and decisions to disclose. While most participants identified as white, two participants identified as people of color, and one participant identified as "other." These participants described their experiences in terms of their racial identity. Also, one white participant indicated having a nonwhite partner, which also affected their experiences to disclose.

Both J and JJ discussed their experiences as people of color. In J's discussion, they talked about societal expectations for black girls. As referenced previously, J

explained that black girls are "not supposed to let things like a man hitting us happen and just let it happen." J's explanation suggests a different formula story for black women, in which helplessness is only expected in the absence of physical abuse. Since the dominant formula story tends to represent white women, J's race might make their experiences illegible according to that story but legible according to societal expectations for black women.

With JJ, JJ's racial identity made JJ's experiences illegible and unbelievable, especially since JJ's perpetrator was white. JJ explained a fear, especially contacting the police. JJ said, "Growing up as a person of color I was always afraid of police. I watched my best friend get shot by police when we were both 9 for playing with toy squirt guns." JJ feared the treatment JJ would experience by the police, and since JJ's partner was white, this exacerbated those fears.

D, on the other hand, identified as white, but due to an awareness of privilege and oppression, hesitated to believe they can be experiencing abuse because their partner was biracial. D assumed that their privileged racial identity would make them more likely to be abusive and not abused. They also, again, noted a desire to protect their partner because of their partner's racial identity and ability.

Other identities. In addition to ability status, sexuality, and race, JJ and M discussed other identities and experiences that shaped their decisions to disclose. While such identities and experiences were unique in this study, they indicate a possible need to look at other identities and how these affect decisions to disclose and experiences disclosing.

JJ noted how other identities, such as social class, religious identity, and ability to speak English, had an impact on JJ's experiences with abuse:

I worried cops would twist my words because I don't speak English as well as her, and I worried that the cops would either not trust me because I was low income or would let her off the hook because she had money and was white and ablebodied and had a lot going for her at the time.

Because JJ did not speak English as well, and because of JJ's income status, JJ worried the abuse would not be believable- especially in comparison to JJ's partner's income status and ability to speak English well. In addition, JJ identified as Muslim and felt this would also paint JJ as a perpetrator instead of a survivor. JJ explained, "With all the hatred towards Muslims in the US these days I was worried the cops would view me as a suspect right away."

M also described additional experiences and past identities that affected her decisions to disclose. During the time of her second experience with abuse, M had begun using heavy drugs and participating in sex work. She explained:

I get a lot of weird looks from people when I talk about my forays into the heavy drug world. Like my husband [..], I don't talk to him—he doesn't want to hear the stories about my escorting. He doesn't want to hear the stories about my heroin use.

According to M, she had difficulty talking about this abusive experience because it was tied into her drug use and escorting which she feels people do not want to hear about. This led to more silence about her experience.

**Summary.** While this section is categorized by identity, the overlap and intersections make such simple categorizations impossible. Most participants noted multiple identities and their co-existence as factors influencing decisions and experiences to disclose. The ways these identities influenced their experiences also varied depending upon these intersections. Many respondents reported unique experiences based upon their ability status, sexuality, and race, as well as their partner's ability status, sexuality, and race. Additionally, other identities such as class and religion, as well as illicit behaviors should be considered.

# **Implications for Researchers**

At the end of each interview, participants were asked how researchers, practitioners, and/or the general public can better address intimate partner violence in transgender and non-binary communities. Respondents provided many suggestions to better address this issue, and most of these suggestions involved providing more education and awareness about the specific ways IPV can affect these communities. D highlighted the importance and raising awareness about experiences outside of the formula story. They noted:

Normalizing that women can be abusers too is a big one. And that people who are not feminine- either estimated male at birth or gender queer on that spectrum or who are masculine of center, even estimated female at birth- can also be abused, and that's the thing that happens, and It's legitimate. I guess just normalizing abuse situations other than just heterosexual, cisgender woman being abused by a heterosexual cisgender man.

This sentiment was shared amongst multiple participants, some of whom also highlighted the importance of research in this process. In the excerpt below, A discussed the need for more research to inform those within the transgender community:

I think in some ways making it more known. I don't necessarily mean outside of the trans community [...] There is so little known about the trans community and about things happening in the trans community and about experiences in the trans community, and for the most part, it's not been researched. It's been talking to each other about everything that's happening, and so the more research that there is into this that's released, the more people that can be informed.

He later went on to say that this education is especially needed for non-binary communities:

I think it's important within the trans community for there to be more discussion about it- more spaces created to address it both in maybe the more feminine identified or the more masculine identified or really within the people kinda in the middle of the spectrum or outside of the spectrum, you know? Cause as a male, if I feel that I haven't had my situation addressed, you know, then I can only imagine how people of other genders feel because we are only now just starting to even open your eyes to that- that there's genders outside of the binary.

In addition to educating the transgender community, B also viewed research as an important resource to help practitioners. Currently, ze expressed that there was a disconnect between research and practice:

With research, especially in the last 5 years, the new stuff coming out- they were starting to realize that there is a community that is under researched and is not helped. So, the research is there. Unfortunately, like anything in the science community, just because the research is there doesn't mean the practitioners are there to read it. They're not implementing them. They're not taking a lot of this research to heart.

### He further stated:

Trying to get it to the providers, I see disconnect—whether that is from the provider just not wanting to see it or whether this is researchers being comfortable in their own academic sphere and not pushing it to real world application because it's easier to live in the academic world and in theory. It's different in practice.

Thus, while research is important, it is also important for this research to be utilized. Participants noted that research can serve as a way to inform and better provide services if used correctly, but more work is needed to bridge this gap between research and practice.

Some participants also offered suggestions for researchers. JJ suggested that researchers should "use more inclusive language" in their studies. R echoed this suggestion regarding how researchers categorize and classify gender identity. He says to "ask pronouns, ask preferred names, and write them down." He also described an example of what he felt was a proper way to assess gender identity in a study:

[The study] had 4-5 choices of gender identity. They had 'transgender male', 'transgender female', 'nonbinary'. They also had 'AFAB', 'AMAB', 'I cannot say', 'I do not identify with either of these'- stuff like that. Have more categories of gender identity. [...] You know, it was respectful.

In addition to approaching gender identity in research, JJ also had suggestions for how researchers approached the topic. JJ explained that "intersectionality is a huge component in trans and non-binary IPV circles." Furthermore, JJ said:

I think if researchers proposed more inclusive language for the studies they want to do as well as making them more accessible disability wise they would get a more accurate result. There is a very high amount of IPV that happens in disabled non-binary and trans circles and doing a study about that and really getting the statistics together to present to medical professionals and cops and such could really help address IPV in these communities.

JJ explained that intersectional approaches are essential to IPV research in transgender and non-binary communities, while also highlighting the need to bridge the gap between research and the community. In this way, IPV research could inform medical professionals and cops in ways that benefit and support transgender and non-binary survivors.

### CHAPTER V

#### DISCUSSION

This thesis explored barriers and facilitators to disclosure of IPV related experiences for survivors with diverse gender identities. In Chapter One, I presented an overview of the research questions and aims of this study. In Chapter Two, I offered an in-depth review of the existing literature on IPV in LGBT communities, as well as the limited research on transgender and nonbinary survivors. In Chapter Three, I walked through the methods and methodology for this project, and in Chapter Four, I explained the study results. For this final chapter, I discuss the results in relation to the existing literature, as well as discuss limitations to the study and directions for future research.

### Barriers

During the interview process, participants were asked to describe any barriers or hesitations to disclosing their experiences with abuse. Many participants identified perceived or experienced transphobia, minimization of the abuse by themselves or others, and threats to outness as barriers that prevented them from telling others about their abuse. These three themes also had subthemes as were discussed in Chapter Four.

**Transphobia and coming out.** A predominant theme that arose in this study suggested that perceived or experienced transphobia served as a barrier to disclosing abuse. These findings reflected similar findings by Bornstein et al. (2006), Carlton et al. (2015), and Everhart and Hunnicutt (2013). Carlton et al. (2015) found that stigma,

whether overt or subtle, may pose as a barrier for transgender survivors. Especially if survivors are not fully out, disclosing experiences of abuse may expose survivors to discrimination based upon their gender identity. Survivors may fear their loved ones abandoning them, losing their job, or being verbally or physically discriminated against. Everhart and Hunnicutt (2013) also found that participants were less likely to seek institutional support for fear of being discriminated against or delegitimized. In their study, participants expressed doubt that institutional services could offer support outside of a heteronormative context. This doubt in institutional services could be explained by queer theory which suggests that social institutions approve or deny resources based upon gender and sexual designations (Jagose, 1996).

The current study echoed these findings with 5 out of 9 participants indicating anticipated transphobia as a barrier to disclosure. Participants indicated a connection between disclosing their experiences of abuse and disclosing their gender identity. This dual disclosure enhanced fears of being rejected by loved ones, having their gender identity invalidated, and/or being misgendered and deadnamed. For many, these fears stemmed from past experiences with transphobia, and such fears of transphobia are not unfounded. In a study surveying approximately 6,450 transgender individuals, Grant et al. (2011) found 63% of participants had experienced discrimination because of bias toward their gender identity. This bias included job loss, bullying and harassment, and physical assault. Participants in the current study also shared experiences with or fears of job loss and harassment due to their gender identity.

Carlton et al. (2015) discussed how this fear of transphobia can differ based upon varying levels of outness. For participants who are not fully out, disclosing their abuse to loved ones may force them to come out exposing them to potential transphobia (Carlton et al. 2015). Also, for transgender survivors who are currently passing, this forced outing can be detrimental and lead to transphobic responses. In addition, coming out is an ongoing process. While survivors may be out to everyone in their lives, disclosing their experiences to strangers may present a need to come out again. In the current study, participants discussed fears of transphobia in each of these regards.

For participants who weren't out, disclosure was not seen as an option. Similarly, Carlton et al. (2015) found that transgender survivors may be more willing to stay in the abusive relationship than risk being outed when seeking support. Though my sample of participants who were not out is too small to fully support this finding (N=2), this could be a topic worth exploring in future research. Both participants, who were not out, talked at length about their level of outness as a barrier to disclosure. To disclose their experiences or even end the relationship put them at risk of being outed or having to come out.

Even some participants who were out in most spheres discussed the difficulty of coming out to law enforcement or other agencies when seeking support. This led survivors to only seek this institutional support when in extreme distress. Everhart and Hunnicutt (2013) also discussed participants' hesitancy to contact law enforcement for fear of potential violence, discrimination, and revictimization by the police. Similarly, Bornstein et al. (2006) found that participants believed authorities would not treat them

respectfully, believe them, or offer them protection. While some of the participants in Borstein at al.'s study (2006) had already had negative past experiences with law enforcement, others assumed this experience would be negative. Diaz (2013) also found that transgender survivors felt uncomfortable contacting law enforcement and experienced transphobia and discrimination when they did contact the police.

According to queer theory, bodies are regulated by social institutions through gender designations. These designations are used as sources to approve and deny validity and institutional resources (Jagose, 1996). Because participants do not fit into the socially approved, gender designations assigned to them at birth, these social institutions may be more likely to deny access to support and resources. Often institutional structures and services are not available for trans and nonbinary individuals, and this could explain the transphobia within these institutions, as well as participant's experiences with transphobic law enforcement agents.

Within the current study, the only participants who discussed any consideration disclosing to law enforcement were participants who did end up contacting the police. These were in cases where their physical safety was threatened, and participants reported negative experiences that involved being misgendered and not taken seriously. These feelings reflected results from Grant et al's nationwide survey (2011) which found that 46% of participants felt uncomfortable seeking police assistance. In the same survey, 29% of participants indicated experiencing harassment or discrimination by the police, which could likely inform this discomfort. While law enforcement is considered the protector of IPV survivors, and many campaigns to end IPV has sought strengthened laws

and legal protections (Kim, 2013), transgender survivors experience discomfort and discrimination when seeking help through this avenue. The likelihood of discrimination and transphobia by law enforcement can affect the levels of underreporting in transgender and nonbinary communities.

In addition to external transphobia, internalized transphobia was reported as a barrier to disclosure. Greenberg (2012) explained that transgender people may internalize the hate and shame they have experienced by others and/or believe they are abnormal or inadequate. This has led transgender survivors to believe they deserved the abuse or somehow caused it. Similarly, participants in this study reported feeling at fault for their abuse. Some indicated their gender identity being a cause of the abuse, and others indicated an inadequate gender identity because they could not stop or prevent the abuse. Carlton et al. (2015) also reported that internalized shame could prevent disclosure and lead to depression or withdrawal, and Bornstein at al. (2006) found that respondents may feel inadequate in their gender identity, which then becomes further capitalized on by the abusive partner.

Minimizing abuse. Seven out of nine participants discussed the minimization of their abuse as a barrier to disclosure. Some participants were unable to recognize their experiences as abuse, while others feared their experiences wouldn't be recognized by others. Everhart and Hunnicutt (2013) reported that queer identified survivors may be initially unable to identify their experiences within a framework of IPV due to the misconception that IPV only occurs in specific gendered and heteronormative contexts.

Bornstein et al. (2006) also found that LBT survivors did not initially label their

experiences as abuse because they lacked information and resources about IPV in the LGBT community. Because there is limited information that is circulated within society about IPV in LGBT relationships, many participants have a harder time identifying themselves as survivors and their experiences as abusive.

When participants were asked who the average American would consider most likely to be affected by IPV, all but one participant indicated a woman. Multiple participants specified this woman to be white, straight, and cisgender. The perpetrator was most likely to be a man, and the violence was most likely to be physical. Participants recognized the formula story of IPV, as described by Loseke (2001), on some level, and some participants referenced this formula story in the reasoning for why they minimized their experiences. Many participants did not have other conceptualizations of IPV, and multiple participants did not view their experiences as abusive until after the relationship ended.

Participants also indicated a fear that others would minimize their experience.

This fear mirrored findings by Bornstein et al. (2006) who suggested that the same lack of information about IPV in LGBT communities can confuse friends and families of survivors, making it difficult to recognize the experiences as abusive. Carlton et al. (2015) also discussed how a lack of information and research about IPV in the LGBT community may prevent others from understanding the specific ways that violence can manifest for LGBT survivors. These experiences may be hard to recognize as abuse, and they are more likely to be dismissed and minimized.

### Aids

While participants indicated several barriers that prevented them from disclosing their experiences, all participants eventually disclosed to someone. This disclosure was not random, and it was influenced by a number of facilitating factors, such as having support, feeling a sense of urgency, and wanting to educate and help others. Carlton et al. (2015) explained that many LGBTQ individuals carefully manage who knows about their sexual orientation and/or gender identity. Similarly, transgender survivors may carefully manage who knows about their experiences of abuse, and participants in this study only disclosed when one or more of these facilitating factors were present.

Support. Most participants in this study disclosed their experience to others whom they perceived would be supportive of their gender identity. For many, this meant disclosing to a transgender friend or acquaintance. For others, it included cisgender friends or family members that had demonstrated support and LGBT-affirming attitudes in the past. Likewise, Everhart and Hunnicutt (2013) found that queer identified survivors were more likely to seek support from close friends and loved ones, utilizing informal support networks. Borstein at al. (2006) also noted that survivors relied heavily on community support to help identify their abuse. Having a supportive and trans-affirming network helps to minimize the perceived threats of transphobia, making it easier to talk about abusive experiences. Because the LGBT community has historically lacked systemic support, this informal community has a great influence on individual members.

In addition to informal support, some participants noted seeking formal support, especially counseling. While many participants were not attending counseling

specifically for their experiences with abuse, these experiences did become a part of counseling sessions. Bornstein et al. (2006) also found that participants often reported seeking support from counselors, though these experiences were considered mostly negative as counselors minimized the abuse and blamed the survivors for their experiences. This experience differed from that in the current study where all participants who sought counseling reported positive experiences with their counselors.

Urgency. With this study, multiple participants indicated a sense of urgency that facilitated their disclosure. This feeling stemmed from threats to their physical life and safety, as well as strains on their mental wellness and feelings of overwhelm. This was an unexpected finding in the study, though interviews done with cisgender women survivors of IPV by Lewis et al. (2015) indicated similar findings. Lewis et al. (2015) found that women emphasized death threats by their abusive partner and feelings of dying as pivotal moments in their relationships. These moments were turning points that facilitated the participants in seeking help and ultimately ending the relationship. Further exploration can clarify how feelings of urgency facilitate disclosure.

**Educating others.** In this study, participants also cited a desire to help and educate others as a facilitator to sharing their experiences. While this can have benefits for the self and others, this also externalizes the need to disclose. Like the sense of urgency, this was an unexpected finding in the study, and it can greatly benefit from more clarification and future research.

# **Lived Experience or Formula Story?**

Most participants indicated an awareness of the formula story for IPV, suggesting that most Americans view IPV as physical violence enacted upon a cisgender woman by a cisgender man. This formula story, however, did not fit with the lived experiences of participants, and participants were forced to navigate this discrepancy. For some, the failure of their gender identity to fit the formula story led to nondisclosure. For those who did disclose, some strived to conform to certain elements of this story while others actively challenged this. The act of conforming to or challenging gendered norms and behaviors entails what West and Zimmerman (1987) termed "doing gender." Individuals engage in gendered behavior within social interactions. This seeks to reproduce and instill one's gender identity and the concept of gender within society.

Nondisclosure. Some participants referenced the formula story as they discussed barriers to disclosure. In this reference, they noted the discrepancy between this formula story and their lived experience of abuse. This often stopped them from recognizing their experience as abuse or allowed them to shift the blame onto themselves for the abuse. These participants tended to be more masculine identified, and some saw this abuse as a failure of their gender identity. This finding parallels the experiences of cis-gender men, who also may have a hard time recognizing their abuse or disclosing to others (Tsang, 2015). For cisgender men, survivorship may appear to directly contradict their masculinity. Masculine identified participants in the current study also felt this threat to masculinity, though it rooted itself in a feeling of inadequacy due to their trans status.

This feeling intensified as abusive partners tended to direct their abuse towards survivors' trans status, which is also a finding noted by Bornstein et al. (2006) and Diaz (2013).

Only masculine participants indicated this failure to fit into the formula story as a reason for nondisclosure. The absence of this finding for feminine participants could suggest that these participants more closely fit the formula story. Transgender identity may present less of a mismatch with the formula story if a survivor is feminine presenting, particularly if the survivor is passing. In fact, multiple participants, especially both participants who were not out, indicated that gender perception affected their decisions more than their gender identity.

Conforming. To be legible as survivors, some participants tried conforming more to the formula story for IPV. This, at times, included invalidating their or their partner's gender identity. For participants with partners who were transgender women, the participants emphasized their partners physical size and power reminding those who they disclosed to that their partner had the physicality of a male. Also, one participant regularly emphasized his female biological sex to explain why he was more susceptible to abuse.

Miller (2004) found when interviewing sex trafficking victims that participants often emphasized characteristics, such as helplessness, that would help them be recognized as an ideal victim. Conforming to this feminine gender role granted more legitimacy and support than if participants displayed acts of strength and agency. This could also be explained by a symbolic interactionist perspective which views social interaction as part of a performance where one portrays a particular self to others in

return for support, acceptance, and/or resources (Goffman, 1959; Manis & Meltzer, 1978; Rose, 1962). K hinted at this symbolic interactionist perspective when she referenced the Shakespeare line that "all the world's a stage." This performance is a gendered one, and people regularly perform gender in everyday interactions (West & Zimmerman, 1987).

Participants, who conformed to the formula story, presented their gender in incongruent ways to their identity when they were faced with others' who otherwise disbelieved their experiences. For example, R reinforced his biological sex only after the police used his biological sex as the basis for validating his experience. This focus conformed to the formula story of IPV, and this allowed for his experiences to be legible and valid.

Unfortunately, findings in this area were limited, which may indicate a limitation in the interview protocol, too small of a sample size, or minimal support for the finding. Future research that focuses more on how survivors construct their narratives may capture more information on this topic.

Challenging. Though some participants did discuss ways in which they actively challenged the formula story, this finding also had limited support. For some challenging the formula story involved invoking strength and empowerment, rather than helplessness. This finding mirrored Jagervi (2014) who found that survivors accepted the label of victimhood while rejecting the notions of weakness and helplessness attached. Instead participants constructed their stories as tales of person strength. Diaz (2013) also found that survivors rejected the notions of weakness and submissiveness associated with traditional victimhood.

For B, ze utilized hir gender identity to actively disprove the formula story of IPV, reminding others that men could be abused too. In this way, the formula story is blatantly challenged as an act of resistance and as an attempt to shift the story to incorporate cis and trans men. This finding was unique to the study and could benefit from future exploration.

Gender perception. Lucal (1999) explained that how others perceive one's gender may have more of an effect on social interaction than one's actual gender identity. In other words, gender perception may affect participants' experiences with disclosure, as well as gender identity might. This appeared to be the case in the current study where participants' decisions to disclose and experiences disclosing were affected by gender perception. Especially for participants who were not out, the gender they displayed and were perceived as having affected their decisions to disclose similar to their gender identity. While some of their hesitations involved being outed, other hesitations involved the failure of their perceived gender to fit into the formula story, though this perceived gender did not match their identity.

Other participants also noted being commonly identified as a gender in which they did not identify. JJ, for example, reported being identified as a man, even though JJ actually identified as agender. Lucal (1999) found that a person who doesn't "do gender" according to the gender binary will often be placed by others into the binary gender category with which their display seems to closely fit. One cannot escape doing gender because others will still perceive them within the gender binary. Lucal was referring here to West and Zimmerman's concept of "doing gender" and the symbolic interactionist

perspective (Lucal, 1999). While gender is part of a performance, this performance occurs in a mutual exchange between social actors; therefore, the perceptions and actions of others whom participants engage with also affect participants' gender performance. A future study can benefit from elaborating more on this difference between gender identity and perception in order to determine the different ways they affect decisions to disclose.

## Intersectionality

While this study focused largely on gender identity, participants talked about the effects of their race, sexuality, and ability on their experiences and decisions to disclose. This follows Collins' (2000) idea of intersectionality, where the intersections of multiple social identities create unique experiences. While all participants may experience transphobia, these experiences slightly varied based upon racial identity, sexual identity, or ability status. Participants often reported that other marginal identities compounded their barriers to disclosure, either making it easier to minimize the abuse or invoking a fear that they would be treated poorly and discriminated against.

Previous studies also echo this idea of intersecting identities. Mendez (1996) discusses the intersections of race and gender when seeking help for IPV. Survivors of color may be less likely to seek services for fear of racism, and they are also more likely to experience mutual arrest. Wriggins (1984) also found that women of color are less often considered survivors than their white counterparts, and black men are more often considered perpetrators. In this case, the formula story may affect survivors of color differently and create unique barriers to disclosure. In the current study, participants of color noted race-related differences in their experiences and recognized how the formula

story for IPV focuses on white women survivors. Even a white participant whose abusive partner was a person of color recognized how race impacted their decision to seek help.

Crenshaw (1991) noted that people of color may not disclose their experiences, especially to the criminal justice system, for fear of victimizing their partner if their partner is a person of color.

Similar sentiments are shared by people with a minority sexual identity. Everhart and Hunnicutt (2013) found that survivors who practiced BDSM had unique hesitations seeking support for fear of stigma. These findings parallel a similar finding in the current study. Participants who practiced BDSM had a harder time identifying their experiences as abuse. Claims of practicing BDSM were also utilized by abusive partners to downplay the abuse that was experienced. In this regard, BDSM was used to minimize the abuse, and stigmas surrounding BDSM were relied upon to dissuade police involvement.

While this study was open to any intersections of identity, the focus on BDSM was not an expected finding. More research is needed that focuses on intimate partner violence within the BDSM community, especially since this community is often stigmatized. Pitagora (2016) found that participation in the BDSM community can complicate decisions to disclose experiences of IPV, though she also noted that research was limited. In a small study with only four participants, Pitagora (2016) found that survivors may be less able to distinguish the abuse from consensual BDSM, and they may also resist seeking help due to the stigma against BDSM practices.

In addition to race and sexuality, ability status also played a significant role in this study. This was also an unexpected finding. Multiple participants reported having a

serious health condition or disability while others stated their abusive partner had a health condition or disability. This affected participants' ability to recognize the abuse and it dissuaded participants from disclosing to others. Barranti and Yuen (2008) find that IPV amongst survivors with disabilities is an under-researched area, though preliminary studies suggested that women with disabilities experience intimate partner violence at rates similar to or greater than able-bodied women. Future research could benefit from a focus on the intersections of gender identity and ability status in relation to experiences with intimate partner violence.

### Limitations

Though several important themes emerged through this study, it is also important to acknowledge significant limitations in regard to sample size and demographics.

Recruitment for this study proved difficult due to the sensitive subject matter. Both transgender identity and survivorship are stigmatized identities faced with potential traumas when considered separately. The combination of these two identities can lead to a heightened vulnerability and hesitancy participating. This study focused on barriers to disclosure under the assumption that transgender survivors face unique barriers to discussing their experiences and may be less likely to disclose. Because participation in this study is another act of disclosure, difficulty with recruitment wasn't surprising.

While I marketed my study through many avenues, including transgender organizations, listservs, forums, and social media pages, I received limited interest in the study. Many who contacted me with initial interest in participating withdrew their interest. Even amongst those who chose to participate, two participants indicated an

initial desire to drop out of the study for mental health concerns and fear it would be retraumatizing. It is possible, though difficult to prove, that other potential participants withdrew their interest for similar reasons.

Because of this difficulty recruiting, my sample size was small (N=9). Such a small sample size makes it impossible to fully generalize findings, and certain, potentially important findings had limited support. With a larger sample size, it would be easier to determine patterns in the findings and to distinguish powerful results from happenstance. This small sample size is especially detrimental considering the variation of my population. While I had only nine participants, many participants had different gender identities, with little overlap. Expecting overwhelming support for findings assumes that there is one transgender experience that all participants share, ignoring the ways that different gender identities and presentations can lead to unique barriers, facilitators, and experiences disclosing. This can be seen for research question two. While only three participants out of nine chose not to disclose due to their gender identity not fitting the formula story, these participants also represent three out of four participants who were more masculine identified. In this context, the results may be worth further exploration.

This smaller sample size also created limitations surrounding other identity categories. Only two participants identified as people of color, while six identified as white, and one identified as other. This limits the effect of findings surrounding race. In addition, only two participants were not out during the time of the abuse which lends little support to findings on outness. While these findings may still be important,

determining their significance depends on developing a study with a larger, representative sample size.

### **Implications and Directions for Future Research**

While this study explored experiences with IPV and decisions disclosing these experiences amongst transgender survivors, more research on this topic is needed. These findings do suggest that transgender survivors experience unique barriers and facilitators to disclosure based upon their gender identity. With a larger sample size, these findings can be further explored and elaborated on. Particularly, studies that focus on different gender identities within the transgender umbrella can provide more unique results. Rather than assuming a shared "trans experience," future studies may benefit from looking at certain trans identities.

This study also suggests that a deeper focus on intersections of race, gender, sexuality, and ability status are needed in IPV research. Research is currently limited on IPV in BDSM communities as well as IPV amongst those with disabilities, yet the little research that does exist suggests that these survivors may face unique challenges and stigmas. This study further highlighted that suggestion, and more research should be done to fully understand this topic. It appears evident that the current formula story for IPV leaves out many survivors of varying races, genders, sexualities, and ability-statuses. This can impact individual perceptions of abuse and decisions to seek help and support. Future research should seek to understand the ways this story fails survivors and construct new ways to approach intimate partner violence that increases support for all survivors.

As participants noted, another important step in research is connecting findings back to practitioners and the general community. Multiple participants indicated a need in the transgender community for more information and awareness surrounding intimate partner violence. Further research can meet these aims while also providing resources to practitioners, service providers, and law enforcement so that they can better serve transgender communities. When researchers bridge the gap between themselves and the broader community, the implications of research on practice can be transformative.

### **Conclusions**

This study represented one of few attempts to understand experiences of intimate partner violence in transgender and non-binary communities. Many studies that focus on IPV in the LGBT community focus primarily on gay and lesbian respondents and offer minimal findings for transgender survivors (Bornstein et al., 2006; Carlton et al., 2015). A focus on transgender and non-binary survivors is needed, however, as Grant et al. (2011) reported in The National Transgender Discrimination Survey that 19% of transgender respondents and 21% of gender nonconforming respondents experienced domestic violence. While a significant number of transgender individuals experience intimate partner violence, current conceptualizations of IPV focus on the experiences of cisgender women survivors (Erbaugh, 2006). The current study sought to understand the experiences with IPV that are unique to transgender survivors, as well as the barriers and facilitators to disclosing their experiences and seeking support.

While this study had limitations due to a small sample size, it could offer preliminary insight into how transgender survivors process and understand their

experiences and share these experiences with others. The study shed light on barriers and aids to disclosure influenced by gender identity, race, sexuality, and ability status. In doing so, this study also managed to challenge dominant paradigms, such as the mainstream formula story for IPV. Ultimately, I hope this study can uplift the voices and experiences of participants and contribute to a much-needed dialogue about IPV in transgender communities. This topic can benefit from future research that explores the connections between gender identity, race, sexuality, ability status and survivorship through more in depth interviewing of a larger sample. By utilizing the results of this study and future studies, researchers, practitioners, service providers, and the general community may gain a more nuanced perspective on how to understand and approach intimate partner violence in a way that is accessible and inclusive of everyone.

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#### APPENDIX A

#### **CONSENT FORM**

#### UNIVERSITY OF NORTH CAROLINA AT GREENSBORO

Project Title: <u>Barriers to Disclosure for Intimate Partner Violence Survivors Outside of the Gender Binary</u>

Principal Investigator and Faculty Advisor (a Victoria Kurdyla; Gwen Hunnicutt, Ph.D.	if applicable):
Participant's Name:	

## What are some general things you should know about research studies?

You are being asked to take part in a research study. Your participation in the study is voluntary. You may choose not to join, or you may withdraw your consent to be in the study, for any reason, without penalty.

Research studies are designed to obtain new knowledge. This new information may help people in the future. There may not be any direct benefit to you for being in the research study. There also may be risks to being in research studies. If you choose not to be in the study or leave the study before it is done, it will not affect your relationship with the researcher or the University of North Carolina at Greensboro.

Details about this study are discussed in this consent form. It is important that you understand this information so that you can make an informed choice about being in this research study.

You will be given a copy of this consent form. If you have any questions about this study at any time, you should ask the researchers named in this consent form. Their contact information is below.

### What is the study about?

The purpose of this study is to identify and understand barriers to disclosure of intimate partner violence for transgender survivors while in their previous abusive relationship. In particular, we are interested in how gender, sexual, and racial identities may affect if and how survivors tell others about their experiences.

# Why are you asking me?

You have been invited to participate in this study because you report that you were in a previous relationship in which you were abused by a former partner (i.e., you experienced intimate partner violence; IPV). By IPV, we mean that you were physically, sexually, and/or emotionally abused by a former intimate partner. Because we don't want to contribute to current suffering, we will only invite participants who have been out of any abusive relationship for at least one year. Other criteria to be eligible to participate in this study include (a) being at least 19 years old and (b) identifying with one of the following gender identities in the previous abusive relationship: transgender, non-binary, genderqueer, agender, or gender nonconforming.

# What will you ask me to do if I agree to be in the study?

If you agree to participate in this study, you will be asked to participate in an interview during which you will be asked to share about your life experiences that are connected to your experience with IPV. We will ask you questions about your understanding of intimate partner violence and gender identity, your decision whether or not to tell anyone about your abuse, and barriers that may have affected your decision to tell someone. We estimate that the interview will take 1-2 hours to complete depending on the depth of responses. You will have the option to complete the interview in person on the University of North Carolina Greensboro (if local), over the phone, or on WebEx.

### Is there any audio/video recording?

This study will involve audio recording of the interview for transcription purposes. The principal research will have sole access to the audio recording. Because your voice will be potentially identifiable by anyone who hears the recording, your confidentiality for things you say on the recording cannot be guaranteed although the researcher will try to limit access to the recording as described below.

The audio-recording will be stored electronically in a password-protected Box folder which only I will have access to. The audio-recording will be listened to in a private room to minimize threats to confidentiality, and the recording will be deleted after transcription is complete. For interviews conducted via WebEX, the initial recording will be stored on the UNCG network in a password-protected directory which only I have access to. Upon completion of the interview, the WebEX recording will be moved to Box and deleted from the UNCG network.

De-identified transcriptions of the audio-recordings will be stored in a password-protected Box folder, accessible by me and my faculty advisor.

#### What are the risks to me?

The Institutional Review Board at the University of North Carolina at Greensboro has determined that participation in this study poses minimal risk to participants. There is risk that participants will experience some emotional distress as a result of reporting about

past experiences with being abused. Please note that you do not need to answer any questions that you do not feel comfortable answering. You may also choose to end the interview at any time.

If you have questions, want more information or have suggestions, please contact Victoria Kurdyla who may be reached at vakurdyl@uncg.edu or Gwen Hunnicutt, who may be reached at gchunnic@uncg.edu.

If you have any concerns about your rights, how you are being treated, concerns or complaints about this project or benefits or risks associated with being in this study, please contact the Office of Research Integrity at UNCG toll-free at (855)-251-2351.

Should you need any resources related to past or current experiences of intimate partner violence, we refer you to the following organizations:

- The National Coalition Against Domestic Violence (http://www.ncadv.org/)
- The National Domestic Violence Hotline (http://www.thehotline.org/; 1-800-799-SAFE).

Should you need any resources related to gender identity, we refer you to the following organization:

• The National Center for Transgender Equality (http://www.transequality.org/)

# Are there any benefits to society as a result of me taking part in this research?

Potential benefits to society may include increasing knowledge about intimate partner violence in relationships where survivors do not identify as cisgender. The study may also raise awareness about different barriers to disclosure, which can shift the way intimate partner violence services are provided.

## Are there any benefits to *me* for taking part in this research study?

There are no direct benefits to participants for participating in this study.

# Will I get paid for being in the study? Will it cost me anything?

You will not be paid for participating in this study. There are also no costs to you or payments made for participating in this study.

### How will you keep my information confidential?

All physical information will be stored in a locked file cabinet to which only the researcher has access, and all electronic information will be stored in a Box folder protected by a password to which only the researcher has access. WebEX recordings initially stored on the UNCG network in a password-protected directory, will be moved to Box. Participants will also be given a pseudonym and all identifiable information will be removed from transcripts and from my thesis. A master list connecting participant identity to a pseudonym will be stored in a locked file cabinet, separate from the data, to

which only the researcher has access. Additionally, the researcher will not identify participants by name when data are disseminated. Data will be kept for an indefinite period, but will remain without identifying information. The Box folder will remain password-protected and accessible by only the principal researcher and faculty adviser. The faculty adviser will have access to de-identified audio transcriptions in the Box folder but will not have access to original audio recordings. All information obtained in this study is strictly confidential unless disclosure is required by law. Absolute confidentiality of data provided through the Internet and teleconferencing cannot be guaranteed due to the limited protections of Internet access. Please be sure to close your browser when finished so no one will be able to see what you have been doing.

## What if I want to leave the study?

You have the right to refuse to participate or to withdraw at any time, without penalty. If you do withdraw, it will not affect you in any way. If you choose to withdraw, you may request that any of your data which has been collected be destroyed unless it is in a deidentifiable state. The investigators also have the right to stop your participation at any time. This could be because you have had an unexpected reaction, or have failed to follow instructions, or because the entire study has been stopped.

### What about new information/changes in the study?

If significant new information relating to the study becomes available which may relate to your willingness to continue to participate, this information will be provided to you.

#### **Voluntary Consent by Participant:**

By participating in the interview, you are agreeing that you read and you fully understand the contents of this document and are openly willing consent to take part in this study. All of your questions concerning this study have been answered. By participating in the interview, you are agreeing that you are 19 years of age or older and are agreeing to participate in this study described to you by <u>Victoria Kurdyla</u>.

#### APPENDIX B

# **INTERVIEW QUESTIONS**

- 1. How would you define intimate partner violence?
- 2. How do you think the average American would define intimate partner violence?
- 3. Could you describe the type of person who the average American thinks would be most affected by IPV?
- 4. Can you talk about how gender identity might factor into experiences of IPV?
- 5. How would you describe your gender identity?
  - a. How would you describe your gender identity in the relationship where you experienced IPV?
    - i. How has it shifted?
- 6. Can you tell me about your past relationship in which IPV occurred?
  - a. In what ways would you consider your experience in your past relationship to be IPV?
- 7. Did you ever disclose your experiences to anyone? Who?
  - a. If did not disclose:
    - i. Can you tell me about your process in making the decision not to tell anyone?
      - 1. What were some hesitations you had or obstacles you encountered?
    - ii. Can you explain how your gender identity may have affected your decision not to tell someone?
  - b. If disclosed:
    - i. Can you tell me the story about your experience telling \_\_\_\_
       starting with how you made the decision to tell them?
    - ii. Did you have any hesitations telling ?
      - 1. What hesitations did you have?
      - 2. How did you handle those?
    - iii. How may your gender identity have affected your decision to tell someone?
      - 1. Which pieces of your experiences did you feel like you had to withhold?
      - 2. How did your gender identity affect the way you shared your experiences?

- 8. How may your race have affected your decision to tell someone?
- 9. How may your sexuality have affected your decision?
- 10. Are there any other identities that may have impacted your decision to disclose?
- 11. How might we address the problem of IPV in transgender non-binary communities?
- 12. Demographics (age, race, sexuality)