

Domestic violence service providers' capacity for supporting transgender women: Findings from an Australian workshop

Damien W. Riggs

School of Social and Policy Studies
Flinders University
GPO Box 2100
Adelaide, South Australia, 5001
damien.riggs@flinders.edu.au

Heather Fraser

School of Social and Policy Studies
Flinders University
GPO Box 2100
Adelaide, South Australia, 5001
h.fraser@flinders.edu.au

Nik Taylor

School of Social and Policy Studies
Flinders University
GPO Box 2100
Adelaide, South Australia, 5001
n.taylor@flinders.edu.au

Tania Signal

School of Human, Health and Social Sciences
Central Queensland University
Building 32
Bruce Highway
Rockhampton, Queensland, 4702
t.signal@cqu.edu.au

Catherine Donovan

Faculty of Education and Society
University of Sunderland
Priestman Building
Green Terrace
Sunderland
SR1 3PZ
catherine.donovan@sunderland.ac.uk

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Abstract

Previous research has consistently found that transgender women experience high levels of domestic violence and abuse (DVA). Yet to date no studies have explored the efficacy of training workshops aimed at increasing the capacity of service providers to meet the needs of transgender women. This paper reports on findings from one such workshop developed and run in South Australia. Workshop participants (n=25) from three domestic violence services completed both pre- and post-workshop measures of attitudes towards working with transgender women, comfort in working with transgender women, and confidence in providing services to transgender women. In addition, participants responded to open-ended questions regarding terminology, and awareness of referrals related to the link between DVA and animal abuse. Statistically significant changes were identified on all measures, with workshop attendees reporting more positive attitudes, greater comfort, and greater confidence after completing the workshop. Analysis of open-ended responses found that attendees developed a better understanding of both appropriate terminology, and referrals for women who present to services with animal companions. We conclude with suggestions for how programs and services may become more welcoming and inclusive of transgender women experiencing DVA.

Keywords: domestic violence and abuse, training, service provision, transgender women, cisgenderism, animal abuse

Introduction

Making a significant intervention into the study of domestic violence and abuse (DVA), Authors' own (2010) note that the dominant narrative of DVA focuses solely on heterosexual, cisgender (i.e., not transgender) men and women. Such a focus elides the experiences of people who are not cisgender and/or who are not heterosexual. For transgender women specifically, this can mean that experiences of DVA are not acknowledged as such, or that service providers are ill-equipped to provide inclusive services. Cisgenderism – the ideology that delegitimizes people's own understandings of their bodies and genders (Authors' own, 2015b) – potentially further compounds the responses that transgender women receive when attempting to access domestic violence services. Given, as we outline below, the fact that transgender women are likely to experience violence and abuse at much higher rates than their cisgender peers, a focus on the service needs of transgender women should be treated as a matter of priority.

Whilst specialist domestic violence service provision is typically located within the third sector, responding to DVA represents a significant workload for those working across multiple sectors. As such, social workers, in whatever setting they work, are required to develop skills, knowledge and confidence to work with those who have experienced DVA, their children and/or family members, as well as their abusive partners, and to successfully work in partnership with other agencies in order to

work effectively and inclusively. Whilst skill, knowledge, and confidence development are incorporated into ongoing professional requirements, it is most often the case that the needs of women who are not cisgender (and to a certain extent the needs of women who are not heterosexual) are often overlooked (Tesch and Bekerian, 2015). Moreover, no attention has been given to date to the link between DVA and animal abuse in the lives of women who are not cisgender and/or not heterosexual, an area that the authors' previous research (e.g., Authors' own 2013; 2016) has demonstrated requires concerted attention.

The present paper reports on Australian research designed to determine the capacity of domestic violence service providers to meet the needs of transgender women. This is part of a larger study investigating the relationship experiences of lesbian, gay, bisexual, and transgender people, including relationships where violence occurs. The portion of the study we report on here involved a workshop attended by representatives from three domestic violence services located in South Australia. Of the 28 attendees, 25 completed both pre- and post-workshop surveys that measured (1) attitudes towards working with transgender women, (2) comfort in working with transgender women, and (3) confidence in providing services to transgender women. Additional open ended questions about participants' awareness of appropriate terminology when working with transgender people, and awareness of referrals related to the link between domestic violence and animal abuse, were also included.

Before presenting the findings, we first provide an overview of the small

body of research that has focused on transgender people's experiences of DVA. We then outline our findings and focus our discussion on how service provision for transgender women experiencing DVA might be improved, highlighting the leading role that social work might play.

Previous Literature

Population studies suggest that between 0.5% and 1.2% of people are transgender (Conron *et al.*, 2012; Clark *et al.*, 2014; Dank *et al.*, 2014), though it has been suggested that these are likely underestimates (Möller, *et al.*, 2009). Amongst transgender people, high levels of domestic violence and other forms of abuse are routinely reported (Brown and Herman, 2015; Stotzer, 2009). For example, from their survey of 60 Scottish transgender people Roch *et al.* (2010) report that 80% had experienced some form of violence or abuse, with the most common being emotional (73%), followed by forced sex/physical abuse (~50%). In many cases experiences of violence or abuse led to dire consequences, with 15% of the sample reporting at least one suicide attempt. This particular finding is echoed in a national survey of transgender people in North America (Grant *et al.*, 2011), which found an increased risk for suicide among transgender people who had experienced DVA compared to those who had not. Other increased risks were noted for those transgender people who experienced DVA, specifically an increased likelihood of homelessness, substance abuse, and engagement in sex work. It is worth bearing in mind that the high level of DVA experienced by transgender people occurs within a more general

culture of transgender-directed violence. As Stotzer (2009, pp. 171) notes, while “a large volume of the sexual victimization of transgender people is at the hands of people they know ... [they] often face a lifetime of repeated victimization”.

A complicating factor in addressing DVA as experienced by transgender people is that it is typically under-reported. While DVA is under-reported no matter who the victim is (Authors' own, 2008), members of marginalized communities are even less likely to report violence than those who have access to and knowledge of services. As Brown (2007, pp. 373) points out, “multiple marginality increases vulnerability to violence”. Indeed, Seelman (2015) suggests that transgender people may be at greater risk for victimization, and less able to seek help, than others under the “LGBTQ umbrella” (pp. 310). Despite this, DVA as experienced by transgender people remains critically under-researched (Tesch and Bekerian, 2015). While large-scale, nationally representative, surveys are emerging which examine rates of DVA within same-sex relationships, these do not “track disparities in victimization between transgender and cisgender individuals” (Seelman, 2015, pp. 309), making it difficult to provide robust estimates of the prevalence of DVA among transgender communities.

The research that does exist increasingly demonstrates that not all DVA survivors require the same kind of help, and that services must acknowledge the differences among their clients (Authors' own, 2016).

Transgender people face specific forms of violence and abuse that need to be taken into account by services. A key example of this is identity-related abuse, where the perpetrator targets aspects of the victim's identity as a means to control or belittle them. Tesch and Bekerian (2015) suggest that perpetrators may target a transgender person's "nonconforming gender identity" (pp. 392), which may involve belittling the person's appearance; consistently using the wrong pronoun when referring to them; and fetishising or ignore bodily boundaries (see also Brown, 2011). Similar to the experiences of cisgender lesbians, gay men and bisexual women and men, transgender people may also experience threats to "out" them to their families or friends, or threats and/or the actual withholding of medicine and/or money to pay for medicines or surgery. As Brown (2007, pp. 392) summarises, abusers of transgender individuals "will tailor [their] tactics to exploit... vulnerability over gender transitioning and atypical gender identity".

Given the specific forms of identity abuse transgender people may experience, it is paramount that services acknowledge the different array of potential abuses that sit alongside more traditionally conceived DVA. From the limited literature available in this area, however, it seems as though this is rarely the case (Tesch and Bekerian, 2015). Few services acknowledge the specific needs of transgender people, or acknowledge that reporting abuse may actually involve "outing" oneself, a not insignificant barrier to help-seeking (Brown and Herman, 2015; Seelman, 2015). Moreover, many transgender people may avoid reporting DVA for

fear of further victimization from services that “lack an understanding of the difference between gender, sex and sexuality, specifically in relation to intersex and transgender clients” (Constable *et al.*, 2011, pp. 3, see also Hester *et al.*, 2012). This is unsurprising given the degree of social stigma that transgender people face, stigma which also pervades social services (Seelman, 2015).

In a review of transgender people’s perceived and/or experienced barriers to accessing social services (including domestic violence shelters), Stotzer *et al.*, (2013) concluded that discriminatory behaviours are wide-spread amongst those offering assistance and support. Within this sphere discrimination may be inadvertent, such as providing spaces that only secure cisgender women’s comfort and needs (Seelman, 2015). But, and perhaps more worryingly, it can also be purposeful. As Seelman points out, accessing domestic violence services can result in further harm to transgender women when “... providers blamed the abuse on a client’s gender identity, used incorrect pronouns, asked inappropriate questions about a client’s body/genitals, ‘outed’ clients to their families, or told them they should go back into the closet” (pp. 311). Rogers (2016a) also reports experiences of transgender people who found their gender being problematized by practitioners, rather than focusing on the abuse they had experienced. Potentially underpinning negative service responses are the complex feminist histories that have shaped DVA service provision, and specifically particular feminist standpoints which deny the legitimacy of transgender women’s experiences *as women* (Tosh, 2016).

Service-related barriers to help seeking are further complicated when transgender people request additional help for their animal companions. Research demonstrates that those in violent situations who have a close bond with an animal companion may delay and/or refuse to leave the situation due to fear for their animal's safety (Flynn, 2012). A bond with animal companions may be especially felt in times of crisis (Flynn, 2000), in times of significant life transitions, and during illness (including HIV, Grierson *et al.*, 2013). However, there is little existing research into the intersections of DVA, animal abuse, and transgender people's experiences (Authors' own, 2016). It has been suggested that animal companions may mean more to some transgender people due to lack of support from families of origin (Authors' own, 2015a) and during times of crisis. In turn this may mean that transgender people are even less willing than their cisgender peers to leave animal companions behind when seeking to leave violent or abusive relationships (Authors' own, 2016).

Given that shelters are already perceived of, and experienced as, unwelcoming for many transgender people (Bornstein *et al.*, 2006; Parry and O'Neal, 2015), the inability to accommodate loved animal companions will presumably also add to the barriers that transgender people face when seeking support with regard to DVA. Finally, if crisis and service provider responses fail to appreciate the seriousness of DVA experienced by transgender people, then they are less likely to be attentive to factors that demonstrate the DVA is worsening, such as animal abuse (DeGue and

DiLillo, 2009; Authors' own 2016).

Whilst the above review of previous literature has focused on transgender people in general, there is nonetheless a gendered dimension to domestic violence within transgender communities, just as there is amongst cisgender communities. Transgender women, and particularly those women who are in relationships with cisgender men or women, are especially vulnerable to abuse. This is not to suggest that transgender men do not also experience (or perpetrate) abuse, but rather to acknowledge that the statistics reported above, in addition to international reporting on murders of transgender people (e.g., TransRespect, 2016), indicate that transgender women experience abuse and violence at significantly higher rates than any other group of people. Given that the service providers who participated in the research reported below only work with women, the focus of the research reported below was thus solely on transgender women.

Method and Approach

Workshop

The workshop was designed by the first author, based on previous workshops run and assessed by them (e.g., Authors' own, 2009; 2010; 2013). These previous workshops, focused more broadly on lesbian, gay, bisexual and transgender people, have typically included information

about terminology, population statistics, best practice recommendations, and documentary clips featuring first person narratives. The workshop reported here followed this same format.

For all of its challenges with neoliberalism and welfare austerity, an anti-oppressive practice (AOP) perspective (see Rush and Keenan, 2014; Strier and Binyamin, 2014) underpinned this project and the workshop. AOP is a broad perspective endorsed by professional social work associations in Australia, New Zealand, Canada and in many parts of the United Kingdom (see McLaughlin, 2005; Rush and Keenan, 2014). While it is not without its criticisms (see for instance, McLaughlin, 2005), AOP usefully encourages questions to be asked about how power, status, privilege, oppression and discrimination can, have, and may affect particular populations and their experience of social problems, in this instance, transgender women and DVA.

The AOP-informed workshop began by outlining the theoretical framework of cisgenderism (Authors' own, 2015b). Emphasis was placed on the systemic nature of cisgenderism, and its impact upon how transgender women are viewed and engaged with. Statistics were then presented, drawn from research conducted as part of the *Private Lives* survey (Pitts *et al.*, 2006), as part of the *National Transgender Discrimination Survey* (Grant *et al.*, 2011), and by the Scottish Transgender Alliance (Roch *et al.*, 2010), highlighting the elevated rates of DVA and broader systemic violence faced by transgender women. Specific forms of

DVA perpetuated against transgender women were outlined, with an extended focus on gaslighting as a tool used to discredit transgender women's own experiences. A video featuring the story of an actor playing the role of a transgender woman experiencing DVA from a cisgender female partner was shown at this point (Love Should Never Be Abusive, 2014).

Specific information was then presented on four cohorts of transgender women who may be especially vulnerable to DVA. The first of these was young transgender women, highlighting the potential for elevated rates of family violence (including family rejection) amongst this cohort. A video featuring the story of one young transgender woman was shown at this point (I'm From Driftwood, 2014). The second cohort focus was on the experiences of sistergirls (an Indigenous-specific gender diverse group of people). A montage of video clips were shown, all taken from one documentary (Brown, 2003). The third cohort focus was on refugee women, and information focused specifically on partner visas and how DVA may lead to a visa being revoked. The final cohort focus was on transgender men, including the possibility of such men perpetrating violence or abuse against female partners.

After a break, the workshop continued with a focus on service provision. Information was provided, based on previous research (Roch *et al.*, 2010; Rogers, 2013), about barriers to service provision. A group discussion was conducted at this point, asking participants to share insights about

potential barriers within their own services. Following this discussion, information was provided about best practice approaches to ensuring the inclusion of transgender women in domestic violence services. This information was primarily derived from the work of the North American domestic violence organisation *Forge* (e.g., Munson, 2014). Examples of best practice approaches included ensuring that correct pronouns are used, ensuring the availability of specific resources that transgender women may need when accessing shelter accommodation (e.g., wigs), and educating other clients so as to minimise the likelihood of transphobic responses. Given increasing recognition of links between DVA and animal cruelty/abuse (e.g., Becker and French, 2004), additional information was provided regarding the specific needs of transgender women who present to services with animal companions (see Authors' own, 2016). The workshop concluded with the opportunity for participants to ask any additional questions of the first author.

Design and Procedure

The research reported here utilised a within-subjects repeated measures design. The workshop was conducted following a request from one of the three domestic service providers located in the state of South Australia. The first author met with the managers of the service, and discussed what would be included in the workshop. At this point it was agreed that assessing the efficacy of the workshop would be useful. Ethics approval for the assessment component was granted by the ethics committee of the first

three authors' institution. Following approval, information about potential involvement in the assessment of the workshop was circulated to staff members at all three services. This information stated that completing the assessment surveys was not a requirement of attending the workshop, nor was it a requirement of employment. No incentives were provided to potential participants. Of the 28 people who attended the workshop, 25 completed both the pre- and post-workshop assessments. All respondents gave their informed consent to complete both surveys by reading an information screen and selecting 'yes' to consent to proceed. Participants provided an anonymous identifier code on both surveys so that they could be matched.

Participants

All participants were female. In response to a question asking if they had ever identified as transgender, none of the participants answered yes. Of the participants, 23 identified as heterosexual, and two as bisexual. The average age of participants was 46.68 years ($SD=5.12$ years). On average participants had been working in their current service for 8.3 years ($SD=4.45$ years), and had been working in the domestic violence sector for an average of 13.47 years ($SD=3.74$). None of the participants reported having (knowingly) provided services to a transgender woman before, and none had attended training specific to working with transgender women before.

Measures

Two weeks before attending the workshop, participants completed an online survey, hosted by SurveyMonkey. The survey first collected demographic information (reported above), asked participants to describe their understanding of the terms 'transgender' and 'cisgenderism', and asked if they had previously provided services to at least one transgender woman, if they had attended training previously focused on working with transgender women, if they were aware of the link between domestic violence and animal abuse, and if they were aware of referrals for women who present to services with animal companions.

Participants then completed a measure designed by the first author – the *Attitudes Towards the Inclusion of Transgender Women in Domestic Violence Services Scale* (ATITWDVSS). Aspects of the measure (in terms of general questions about the inclusion of transgender women) were derived from a measure originally intended to assess attitudes towards the inclusion of transgender students amongst educators (Goff, 2014). Additional questions about inclusion were derived from information presented in the workshop, specifically based on the work of *Forge* (e.g., Munson, 2014). The 20 items on the ATITWDVSS (see Table 1) were rated on a five point Likert scale, where 1=strongly agree and 5=strongly disagree.

[INSERT TABLE 1 ABOUT HERE]

In addition to completing the ATITWDVSS, participants also completed a measure designed to assess comfort in working with transgender women, in addition to a measure of confidence in working with transgender women. Both were based on previous research conducted by the first author focused on educators working with transgender and gender diverse students. The measure of comfort included six items, such as 'I would feel comfortable talking about transgender issues with another staff member' and 'I would feel comfortable providing shelter accommodation to a transgender woman'. Each item was rated on a five point Likert scale, 1 = strongly disagree and 5 = strongly agree. The measure of confidence included four items, such as 'I feel confident in my understanding of transgender issues' and 'I feel confident providing services to transgender women'. Again, each item was rated on a five point Likert scale, where 1 = strongly disagree and 5 = strongly agree.

Two weeks after attending the workshop, participants again completed an online survey hosted on SurveyMonkey. This was a briefer version of the first survey, in which participants were only asked the questions about defining 'transgender' and 'cisgenderism', indicated their knowledge about referrals for transgender women who present to services with animal companions, and completed the three measures (of attitudes, confidence, and comfort) outlined above.

Analytic Approach

Data were exported from SurveyMonkey into SPSS 21.0. Once entered into SPSS, negatively scored items on the ATITWDVSS were reversed. Only the 25 people who completed both the pre- and post-workshop assessments were included in the analysis.

When applied to the sample, each of the scales displayed high reliability: attitudes towards inclusion, $\alpha = 0.87$, comfort, $\alpha = 0.89$, and confidence, $\alpha = 0.93$. In terms of the measure of attitudes towards inclusion, higher scores indicate more positive attitudes. The possible range for this measure was 20-100. For the measure of comfort, higher scores indicate greater comfort. The possible range for this measure was 6-30. Finally, for the measure of confidence, higher scores again indicate greater confidence. The possible range for this measure was 4-20.

Cohen's d was calculated for all t-tests. These effect sizes were then used to determine whether the tests were sufficiently powered to warrant rejection of the null hypothesis. Post hoc calculations based on effect and sample size indicated that the within-subjects t-tests far exceeded Cohen's (1988) minimum recommendation of .80.

In addition to comparing the three measures pre- and post-workshop, responses to the open ended questions (i.e., those asking about defining terms and asking about awareness of the link between domestic violence

and animal abuse and referrals for transgender women presenting to services with animal companions) were compared pre- and post-workshop. With regard to the definitions, these were coded by the first and third author in terms of whether or not they adhered to the definitions provided in the workshop. The two authors were in complete agreement in regards to coding. Log-likelihood ratio tests were used (given the small cell sizes) to determine if differences between pre- and post-workshop responses were statistically different.

Results

Attitudes Towards Inclusion Measure

The sample reported more positive attitudes towards the inclusion of transgender women in domestic violence services after attending the workshop ($M=87.8, SD=7.73$) as compared to before attending the workshop ($M=73.2, SD=7.92$), $t = 3.364, p = .01, d = 1.86$.

There was a moderate positive correlation between attitudes and comfort before attending the workshop, $r = .557, p = .01$, and a strong positive correlation between attitudes and comfort after attending the workshop, $r = .927, p < .001$. The difference between these correlations was statistically significant, $Z = 3.344, p = .001$. Whilst participants who reported more positive attitudes reported higher levels of comfort prior to attending the workshop, the strength of the relationship between positive

attitudes and degree of comfort increased after attending the workshop.

There was a moderate positive correlation between attitudes and confidence before attending the workshop, $r = .669$, $p = .05$, and a strong positive correlation between attitudes and confidence after attending the workshop, $r = .882$, $p < .01$. The difference between these correlations was statistically significant, $Z = 1.91$, $p = .05$. Whilst participants who reported more positive attitudes reported higher levels of confidence prior to attending the workshop, the strength of the relationship between positive attitudes and degree of confidence increased after attending the workshop.

Comfort Measure

The sample reported greater comfort in working with transgender women after attending the workshop ($M=27.4$, $SD=1.21$) as compared to before attending the workshop ($M=24.8$, $SD=1.34$), $t = 3.214$, $p = .01$, $d = 1.76$.

Confidence Measure

The sample reported greater confidence in working with transgender women after attending the workshop ($M=18.2$, $SD=1.01$) as compared to before attending the workshop ($M=13.7$, $SD=1.98$), $t = 4.401$, $p = .01$, $d = 1.95$.

Terminology

In regards to participant definitions of both 'transgender' and 'cisgenderism', statistically significant differences were identified when comparing definitions provided before the workshop with those provided after attending the workshop. In regards to definitions of 'transgender', participants were significantly more likely to provide a definition closely aligned with the information provided in the workshop in the follow up survey than would be expected in an even distribution, $X^2 (2, N = 25) = 11.72, p = .05$. In regards to definitions of 'cisgenderism', participants were significantly more likely to provide a definition closely aligned with the information provided in the workshop in the follow up survey than would be expected in an even distribution, $X^2 (2, N = 25) = 15.32, p = .001$. Tables 2 and 3 provide examples of typical definitions both pre- and post-workshop.

[INSERT TABLE 2 ABOUT HERE]

[INSERT TABLE 3 ABOUT HERE]

Awareness of the link between DVA and animal abuse

Before the workshop, 23 of the 25 participants were aware of the link between animal abuse and domestic violence, hence no statistically significant differences were produced as a result of workshop attendance

in this regard. Table 4 includes examples of understandings of the link reported by participants prior to the workshop, suggesting that the sample were well informed in this regard. What did change, however, was awareness of referrals available for transgender women who present to services with animal companions, and where animal companions cannot be accommodated within the service itself. Before the workshop only eight of the participants were aware of such referrals. After the workshop all participants were aware of such referrals. This difference was statistically significant, $X^2(2, N = 25) = 14.85, p = .001$.

[INSERT TABLE 4 ABOUT HERE]

Discussion

The public story of DVA is that it involves harm perpetrated by cisgender heterosexual men over cisgender female partners (Authors' own, 2010). One of the problems with this dominant narrative is the way it eclipses experiences of DVA across diverse populations. This is a problem given the likelihood that transgender people face higher levels of DVA than cisgender people across their lifespans (see Stotzer, 2009; Brown and Herman, 2015; TransRespect, 2016). Because transgender friendly policies and programs are not consistently offered in Australia, transgender women affected by domestic violence may have the need but not the access to, or knowledge of, transgender-friendly domestic violence services (also see Roch *et al.*, 2010).

To reach transgender communities, domestic violence policy makers and practitioners need to do more than permit eligibility to services. As discussed below, they must first make themselves known to potential transgender clients by developing partnerships with transgender communities, and in so doing develop trust and elicit confidence that domestic violence services will be responsive to transgender people's needs.

Preparing to welcome transgender women

To raise awareness about transgender women's needs and interests in relation to DVA, researcher and community practitioner alliances are required. This project is an example of such an alliance. This project was instigated by three local domestic violence agencies and involved the lead researcher, who had established relationships of trust with members of these agencies. It was in this context that the project took place, and the findings provide clear and robust evidence that training workshops can be an effective way to engender confidence and comfort in existing specialist domestic violence service provision staff members.

It must be noted, however, that participants in this study entered with a higher than average commitment to including transgender women in their service offerings and strengthening their knowledge about preferred terminology and other language practices. This openness likely helped to

further improve their feelings of confidence and comfort working with transgender women, and may mean they are more likely to incorporate transgender-friendly practices in the future. Nonetheless, the findings with regards to changes in awareness of terminology and referrals are important with regard to ensuring inclusive services, and are a positive outcome of this project.

Engaging transgender women in domestic violence services

To include transgender women in domestic violence programs and services, a range of strategies are required, including but not limited to community education to raise awareness of how DVA can impact transgender communities (also see Willingham, 2012); policy and program audits to ensure transgender women have access to a full suite of DVA service responses (also see Authors' own, 2010); and training for domestic violence services (including administrative and managerial staff) to ensure there is an agency wide appreciation of issues, rights and sensitivities relating to transgender women. Recruitment strategies of agencies might also be usefully reviewed to ensure that transgender women are welcomed as potential employees within specialist domestic violence agencies.

Concurrent outreach to, and collaborations with, transgender community groups and organisations will likely help guide the priorities, approaches, and language choices for community education and training initiatives that ensue (also see Hester *et al.*, 2012).

Existing programs and services might also be usefully scrutinized for their relevance to transgender women, including current eligibility criteria and use (or absence) of appropriate terminology. Simple questions might be asked such as: What is on offer for transgender women affected by domestic violence? How are these offerings designed, developed, described, evaluated and advertised? Have transgender women been consulted with regards to their service needs? What are the gaps and shortcomings? Do agency brochures and other documentation make it clear that transgender women are welcome into programs and will be treated in a non-discriminatory manner? Will the work of the service be reported in the press, including local transgender inclusive magazines to national and international representations?

Becoming welcoming of transgender women can take time and active attention to transgender women's perceptions, experiences and issues. Having specific leaflets and webpages dedicated to transgender women and their specific potential experiences of DVA can help to demystify the issues and provide insights and referral points. Treating transgender women who are clients in respectful and inclusive ways, using their preferred terminology and personal pronouns, and sustaining this respectful treatment is necessary in order for services to develop transgender-friendly reputations. This project took up just one component of such an approach to transgender-welcoming work: improving the confidence and comfort of domestic violence staff feelings with regard to the inclusion transgender women in their services. It did so from an anti-

oppressive practice perspective, which emphasizes current inequalities (in, between, and across identities), including the need to recognize transgender women's oppression and right to access relevant, supportive and non-discriminatory domestic violence services. Further research is planned to conduct focus groups with transgender women to determine their service needs.

A further barrier to transgender people accessing services is a lack of recognition and naming of DVA within transgender communities. This may be in part due to the public story leading to a belief that DVA only happens in cisgender heterosexual relationships, which may prevent individual transgender people recognising their own experiences within the public story. In addition, and as with other survivors of DVA, violence and abuse might become normalized within relationships such that under-recognition of violence and/or underreporting occurs (Authors' own, 2014). In addition, lack of recognition within transgender communities may occur if violence and abuse are embedded as an ordinary, everyday experience, coming from family members, partners and ex-partners, friends, children, and society more broadly. Rogers (2016b) has offered an analysis of these experiences, highlighting parallels with so-called 'honour' based violence, leading Rogers to coin the term 'transphobic honour-based abuse'. Thus, it is also incumbent upon agencies working to address DVA by raising awareness about violence and abuse more generally, as well as demonstrating their commitment to providing an inclusive, respectful service to those wishing to report their experiences.

Engaging transgender women living with animal companions

Engaging transgender women affected by DVA and who have animal companions is usefully progressed by appreciating the link between human and animal violence, and respecting the possible strength of the bonds between transgender women and their animal companions. It was affirming to see how many participants in this study were aware of the link between human and animal abuse and appreciative of the importance animal companions can play for many people, especially during crises (see Flynn, 2000), including for transgender women.

From an anti-oppressive practice perspective, intersecting oppressions can be recognized on the basis of sexuality, gender and class, but also species (see Legge, 2016; Ryan, 2014). It is important to champion the rights of transgender women and their animal companions, especially those who live in financial hardship and cannot afford to access private housing and support services if affected by domestic violence. Being able to remain in connection with animal companions may be crucial for transgender women seeking help for DVA and rebuilding their lives (see Flynn, 2012). Small but increasing numbers of domestic violence practitioners and managers have shown appreciation of the importance of animal companions to many clients, especially clients who have experienced chronic abuse and multiple levels of disadvantage (see for instance, Legge, 2016), yet much work still needs to be done (see Ryan, 2014).

Conclusion

In conclusion, the discipline of social work has a long history of advocating for social inclusion. Whilst much has been achieved with regards to meeting the needs of cisgender heterosexual women in the context of DVA, the inclusion of other groups of women (and here specifically transgender women) has lagged behind. The research reported in this paper suggests that an anti-oppressive approach to domestic violence service provision can make an important contribution to ensuring the inclusion of transgender women in domestic violence services. Importantly, such an approach should not be limited to simply responding to the violence and abuse that transgender women experience, but must also make an active contribution to reducing violence and abuse before they occur, which requires addressing cisgenderism and transphobia at both societal and institutional levels.

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Table 1. Items on the *Attitudes Towards the Inclusion of Transgender Women in Domestic Violence Services Scale*

Item
1. Legal names which are no longer preferred by transgender women should be public information
2. Transgender clients should be allowed to decide what pronouns are used to refer to them
3. It is the responsibility of domestic violence service staff to stop others from making negative comments about transgender women
4. Transgender women should have to use toilets according to their assigned sex, rather than their gender identity
5. Representations of transgender women should be included in domestic violence resource materials
6. It is unrealistic to expect domestic violence services to cater for transgender women
7. Transgender women should feel safe accessing domestic violence services
8. It is not important for domestic violence service staff to become educated on issues of gender identity
9. It is acceptable to refuse someone services on the basis of them being transgender
10. Domestic violence shelter staff should receive training on working with transgender women
11. Transgender women should not be supported to live as their preferred gender
12. It is inappropriate for service providers to include transgender women
13. It is unnecessary for anti-violence policies to specifically mention gender identity and expression
14. Specific funding should be allocated to supporting transgender women
15. The sex assigned to someone at birth on the basis of their genitalia determines their gender
16. Transgender women should not be allowed to access domestic violence shelters
17. Transgender women are especially vulnerable to domestic violence
18. Services that provide support to transgender women are wasting resources
19. Transgender women typically face unwarranted discrimination in society
20. Transgender women are a risk to other women if they access domestic violence services

Table 2. Descriptions of the term 'transgender' pre- and post-workshop

Pre-Workshop	Post-Workshop
Someone who does not fit into any currently held definition of sexuality	An individual's gender does not conform to stereotypical assumptions associated with their assigned sex
A person who is happier being the opposite sex of what they were at birth	A person whose gender differs from that expected of their assigned sex
A person whose identity doesn't conform with mainstream ideas of male and female genders where the physical sexuality of a person is not the reality of that person's sexuality	Someone who is not cisgender
Transgendered to me means a person identifying as another gender other than the one they were born with	A diverse group of people whose gender differs from normative expectations When someone's experienced gender differs from what is socially expected of their assigned sex.

Table 3. Descriptions of the term 'cisgenderism' pre- and post-workshop

Pre-Workshop	Post-Workshop
The opposite of transgender	Ideology that delegitimises people's own understandings of their genders and bodies
No understanding	Assuming that assigned sex determines a person's gender.
Racism of sexual behavior	Assumption that assigned sex determines gender
I'd have to look it up!	Language such as 'match' and 'swap' are all forms of cisgenderism
I don't know what it means	Assumption that there are only two genders

Table 4. Understandings of the link between domestic violence and animal abuse

Participant Descriptions
People who commit cruelty to animals are more likely to perpetrate domestic violence and or child abuse towards their children
Quite often abuse in dv relationships can and does include abuse of animals, can be used as control mechanisms to keep women in relationships
People who have tendency of violence including abusing animals are likely to abuse humans
Perpetrators who are abusive to animals are often those who use high levels of violence towards their (ex) partners
Perpetrators of DV most likely will have a link to animal abuse at present or when they were younger
