Masculine Trans, Non-Binary and Two-Spirit Gender-based Violence:

An Argument for Inclusion in Women’s Shelters

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Access to women’s shelters that provide services for gender-based violence (GBV), intimate partner violence (IPV), and emergency shelter services has been expanding in Canada since the early 1990s to be more inclusive of the two-spirit, lesbian, gay, bisexual, transgender, and queer community, 2SLGBTQIA (White, C., Goldberg, J., 2006). The inclusion of transgender men, masculine non-binary and two-spirit people is not universally accepted for emergency shelter in women’s spaces and Ontarian organizational policy has been slow to engage with the 2SLGBTQIA to make necessary policy changes to support 2SLGBTQIA survivors (Furman, et al., 2017). Faye Peterson House (FAYE), located in Thunder Bay, ON has endeavoured to improve internal policy for the inclusion of transgender, non-binary and Two-Spirit people who require gender-based violence services. Part of the work produced throughout July and August of 2020 was a full review of all Board and operations policy with the intention to update language and to use non-gendered pronouns, as well as removing any language referencing “residents,” “residential,” “agents,” “agency,” or any other colonial language that is viewed as harmful to relationships with Indigenous communities. FAYE also proposed a review of services for the inclusion of transmen, with a research report investigating the need and the capacity for a women’s shelter to provide such services. This report explores the different dangers faced by transmen who are survivors of gender-based violence, including intimate partner violence. The goal of this report is to illuminate whether women’s shelters have the staff capacity, physical space, and policy to house transmen and/or whether women’s shelters are appropriate spaces for transmen to grow and heal.

Throughout this report, the word “trans” will be used as an umbrella term to encompass transmen or transmasculine persons, including Two-Spirit people who identify on the masculine spectrum. It must be noted that although “trans” is often used as an umbrella term that makes up everyone who is not cis-gendered, it is by no means a definitive category. Gender can be described as a spectrum and people can exist at any point along the spectrum. The gender spectrum has origins in queer theory and through the work of Judith Butler and social constructionism (Serano, J., 2007; Butler, J., 2004). Two-spirit identity is a modern term that recognizes the roles of sacred members in Indigenous culture and it encompasses both gender identity and sexuality (Filice, M., 2020). Using an anti-racist, anti-oppression and intersectional feminist framework, the following analysis will consider the many systemic barriers to service affecting transgender, non-binary, and Two-spirit people. Intersectional feminist framework was theorized by Kimberlé Crenshaw and is meant as “an analytic sensibility, a way of thinking about identity and its relationship to power” (2015). Intersectionality explores the overlapping ways our different identities give us power or diminish it (Crenshaw, K., 2015). When discussing policy or service provision through the lens of gender diversity and inclusion, queer theory can guide what considerations an organization should explore and is used throughout this report to inform recommendations. The key elements used in this report to evaluate trans access to women’s shelters focus on transphobia and homophobia, organizational capacity, the history of Faye Peterson House in Thunder Bay, Ontario, and trans access to men’s shelters.

**Literature**

A literature review was conducted to elucidate current research on trans access to women’s shelter and the specific needs of trans people experiencing gender-based violence. The topics examined for the literature review range from historical feminist liberation and the establishment of women’s shelters to the progression of trans inclusion in social services across North America. The geographical location of FAYE also highlights the need to consider Indigenous perspectives of survivorship, including addressing the 32 Calls for Justice for 2SLGBTQQIA people from the 2018 Missing and Murdered Indigenous Women and Girls Final Report. There are Indigenous-led women’s shelters and organizations that focus on the important cultural aspects of being Indigenous, intergenerational healing and the intersection of trans and Two-Spirit people surviving violence. Although FAYE is not an Indigenous organization, FAYE takes seriously their responsibility to uphold commitments to decolonizing and maintain purposeful, supportive relationships with Indigenous organizations and community members.

Nancy Janovicek wrote an in-depth report in 2007 about the Northwestern Ontario perspective on isolated women experiencing violence and the history of shelter services in the region. Janovicek uses an intersectional approach to the unique barriers, stating “[r]acism, unfair child welfare practices, and discrimination against women in the *Indian Act* made it even more difficult for Aboriginal women to leave violent families” (2007). Although there is no focus on trans bodies in this report, the context given illustrates “regional disparities also shaped these social relations, and, consequently, informed feminist strategies and goals” (Janovicek, 2007).

FAYE started as a joint project between women in the community and the City of Thunder Bay. The feminist world view held by the women who organized services was not compatible with city welfare system frameworks and therefore FAYE opened as an independent organization in 1982 (Janovicek, N. 2007). Since the early 1980s, FAYE has continued to provide services for abused women under a feminist framework. Janovicek’s book and other literature from the early to mid-2000s incorporates the changing of language such as, “battered women” and “violence against women,” to a more inclusive “gender-based violence” and “intimate partner violence”. This is to recognize that violence occurs in same-sex relationships as well. The changing language around recognition of same-sex relationships was a pre-cursor to the acceptance of transwomen in women’s spaces and occurred around the legalization of same-sex marriage (2005) and sexual orientation in the *Charter of Rights and Freedoms* (Rau, K., 2019).

One of the most widely recognized events that triggered transwomen’s advocacy and action to be included women’s spaces was the ejection of four transgender women from the Michigan Womyn’s Music Festival in 1993 (Gendertrash,Issue 2, Vol. 1, pp. 17-20) The four transwomen conducted a survey while attending the festival, prior to being forced to leave, that was meant to gain support for reversing the festival policy on anti-transsexual participation (Gendertrash, 1993). Despite finding support from the women attending the festival, the organizers refused to change the policy and the women were told to leave (Gendertrash, 1993). Transwomen have been subject to violence through exclusion in women’s spaces, unsafe sex work conditions, financial instability, and medical pathology (Greenberg, K., 2012). The public rhetoric around trans exclusion from feminism began in the 1970s with Janice Raymond’s book *The Transgender Empire: The Making of the Shemale*, and those sentiments rippled through women’s organizations for decades after.

In a 1995 issue of *Gendertrash,* Mirha Soleil Ross reported on a survey that the independent zine conducted on transsexual women’s access to shelters spaces in Toronto. The survey found an unwillingness of shelters to answer the survey, stating that “they didn’t know enough about transsexual women at that point to be able to answer the survey adequately” (Gendertrash Issue 1, Vol. 3, 1995). Other responses included basing entry on types of surgery a transwoman must have and on an individual case basis, in order to evaluate someone’s “femaleness” (Gendertrash Issue 1, Vol. 3, 1995). When considering the compounding effects of domestic violence and trans identities, Greenberg points to transphobia as “an extra ‘tool’ in the abuser's arsenal” (2012). Abusers are not the only people who have contributed to violence against trans people. Transgender exclusionary radical feminists, TERFs, are often advocating for women’s safety from “men,” and portray transgender women as personifications of patriarchal stereotypes of femininity working against what the feminist movement has fought for over the last century (Pyne, J., 2015). The irony of trying to live up to certain ideas of “femaleness” is not lost when the same reasoning is used against transwomen wanting to access women’s spaces.

A landmark human rights case in British Columbia was won by Kimerbly Nixon, a transwomen and survivor of gender-based violence (Pyne, J., 2015). Nixon filed a claim when she was dismissed on her first day from a volunteer training at the Vancouver Rape Crisis Centre (Pyne, J., 2015). The case fought against the transphobia Nixon had experienced, and initially won in 1995. Vancouver Rape Crisis Centre (VRCC) appealed the decision and fought until the Supreme Court of Canada decided in favour of VRCC in 2007. This meant that VRCC had won the right to decide who was and who was not a woman (Pyne, J., 2015). The examples given focus on the exclusion of transwomen from women’s spaces. Although the *Human Rights Act* protects “single-sex” spaces, the language of sex and gender are delineated in legislation. In 2013, Bill C-16 passed the house of commons and achieved royal ascent, which added gender identity and gender expression to the *Human Rights Act* (Walker, J., 2016). Sex often refers to physical anatomy, which was weaponized, as evidenced in Janice Raymond’s book, to reject transwomen from women’s spaces. Public discourse surrounding gender identity has changed how spaces are identified and are more inclusive of trans bodies than have been in the past. Some examples of structural changes include gender neutral bathrooms, “X” gender markers on identification, and health information forms with gender and sexual identity.

The 2015 United States report, *Transgender Sexual Violence Survivors*, is an in-depth analysis of a project that focused on trans survivors of sexual violence, using data from the 2004 FORGE survey to better understand how to integrate services for trans people into practice (Cook-Daniels, L., Munson, M.) This report has shaped policy for many women’s shelters across North America and has moved for the inclusion of transmen and masculine trans folks into survivor services, whether in the physical shelter or other outreach services. Gender identity adds a layer of intersectionality to the discussion about sexual abuse, domestic violence, and intimate partner violence. Transphobia and homophobia are large factors when victims are making decisions about whether to report or seek help (Cook-Daniels, L., Munson, M., 2015). According to the Cook-Daniels and Munson report, respondents reported shame and guilt for reporting a transgender partner, for fear their partner might experience transphobia within the system, even as transgender partners (2015). Other respondents reported wanting to deny the events and avoid thinking about the trauma they experienced (Cook-Daniels, L., Munson, M., 2015). Other statistics from the Cook-Daniels and Munson report describe the frequency of assaults over a lifetime, stating that 35% of respondents were assaulted over 5 times (2015). 40% reported the perpetrator being a family member, with 90% of perpetrators being male (Cook-Daniels, L., Munson, M., 2015). Of the respondents, 47% said they did not report the abuse to anyone (Cook-Daniels, L., Munson, M., 2015).

“Plenty of people who were gender non-conforming in childhood or who insisted they were not the gender others said they were, were subjected to ongoing physical, psychological, and/or emotional abuse by adults in their family and/or community. This combination of possibly having been subjected to both gender-related abuse and sexual abuse is part of what can make healing for transgender survivors more complicated than healing for non-transgender assault survivors” (Cook-Daniels, L., Munson, M., 2015)

Some transmen from the report believed that being a transman would lower their chances of being assaulted, but the data collected showed the opposite trend. From the six categories of violence created in the report, female-to-male transmen were more likely to experience violence in five of them (Cook-Daniels, L., Munson, M., 2015). Transwomen were more likely to experience hate violence, by a small margin (Cook-Daniels, L., Munson, M., 2015).

The vulnerability of trans community members was studied in the 2009, Ontario-wide TransPULSE Project, which was aimed at exploring social determinants of health for trans lives. The project reported that 67% of the 433 respondents feared they would die young (Bauer, Scheim, 2015). People experienced discrimination through employment, medical care, and social interactions. The report outlined the types and prevalence of violence respondents had faced with “20% of people reported being physically and sexually assaulted for being trans and another 34% had been verbally threatened or harassed” (Bauer, Scheim, 2015). 7% of respondents in the TransPULSE Project were Indigenous and racism and harassment by police was reported by 35% of Indigenous respondents (Bauer, Scheim, 2015). The report also highlighted that “being incarcerated in a facility appropriate to their gender identity was not sufficient to protect them from transphobic violence” (Bauer, Scheim, 2015).

In *Expanding Our Understanding of Gendered Violence* by Caroline White and Joshua Goldberg, violence experienced by trans people is described as underreported and it is noted the structural and administrative mechanisms that record GBV/IPV statistics are not equipped for trans identities (2006). A recent article published by the Canadian government on GBV for the Survey of Safety in Public and Private Spaces from 2018 reports that 2018 was the first year in which people could identify as transgender and were included in the data set, but the data collection systems of Statistics Canada were not equipped to capture non-binary or two-spirit identities in any real quantity (Cotter, A., Savage, L.). Men are reported to experience unwanted sexual contact, online harassment, and physical violence in proportionally lower amounts than women, but transmen, non-binary, two-spirit are included in those results without delineating the specific data (Cotter, A., Savage, L, 2018). Without the ability to highlight trans experiences with GBV/IPV, it becomes difficult to understand the impact. Without clear data, service provision for trans people is not evidence-informed and not relevant to address their needs. As part of the Canadian federal census data, structural and systemic oppressions still exist. White and Goldberg also reference data collected by the FORGE survey done in 2004 and echo the sentiment of under-reporting and lack of support for trans survivors (2006). Systemic violence is also perpetrated against trans people, as explained by White and Goldberg, as there are “histories of violence against trans people, particularly sex trade workers and prisoners…gendered anti-violence organizations – often the first line of contact for survivors – are often inaccessible because of general public uncertainty whether they provide services to trans survivors…” (2006).

An important aspect of living in Northwestern Ontario is the relationship to Indigenous communities. The Ontario Government website on demographics shows “Thunder Bay is the Census Metropolitan Area with the highest proportion of Indigenous people in Canada [12.7 per cent of the population]” (Statistics Canada, 2016). Another key factor is that “78 per cent of First Nation communities in Ontario are located in Northern Ontario” (Statistics Canada, 2016). The growing need to recognize the specific barriers Indigenous people face when living in Thunder Bay or across the region on reserves and remote communities is imperative when studying Northwestern Ontario. The 2012 TransPULSE Project report *Improving the Health of Trans Communities: Findings from the TransPULSE Project* illustrates that over 30% of Indigenous participants didn’t feel comfortable accessing trans spaces because of their race (Bauer, A., Pyne, J., Redman, N., Travers, R., 2012). Racism, demonstrated by the finding in the Bauer, Pyne, Redman, and Travers report, informs the specific barriers that Indigenous people face when accessing trans spaces and the damage caused by colonial violence (2012). Intersectional analysis requires that complexities of one’s gender and sexual identity are included. The intersectional nature of race, gender identity, sexual orientation, socio-economic status, marital status, religion, ethnicity, etc., are all factors when approaching inclusive operational policy, staff capacity, and providing quality services for people experiencing violence.

In *Invisible Men*, Denomme-Welch, Pyne, and Scanlon provide recommendations for future policy and system changes to be more inclusive of “female-to-male,” (FTM), transmen in men’s shelters. The report specified “FTMs (61%) stated the lack of safety as their reason for not accessing shelters even when homeless, and many participants described a process of weighing risks and trading one unsafe situation for another” (Denomme-Welch, Pyne, Scanlon, 2008). An abundance of data shows transmen did not feel safe in men’s shelters, preferred living on the streets or in crowded apartments to shelters and were denied access to women’s shelters unless they identified as female (Denomme-Welch, Pyne, Scanlon, 2008). Their recommendations ranged from municipal anti-violence campaigns, updating shelter standards to include trans bodies, advocating and educating organizations on violence, and promoting community involvement at all levels of program and communication development (Denomme-Welch, Pyne, Scanlon, 2008). These recommendations centred an anti-oppression and anti-racist framework meant to reduce barriers to service and offer transmen safe spaces in men’s homeless shelters.

There is not a lot of literature on how masculine transgender, non-binary, or two-spirit people are affected by violence, so *Invisible Men* serves to illuminate the gap in services for trans survivors of GBV/IPV. Transmen are susceptible to violence and Bauer and Scheim write, “experiences of discrimination and violence can result in exclusion from social spaces, unemployment, avoidance of health care, and poor mental health” (2015). In the 2015 Canada Trans Youth Survey, Elizabeth M. Saewyc, Jake Pyne, Hélène Frohard-Dourlent, Robb Travers, and Jaimie Veale collated data foryouth, (14 to 25 years old) that “26% of Ontario participants reported being physically forced to have sexual intercourse when they did not want to”. Further “[s]exual assault is a serious form of violence and can lead to a myriad of mental health issues, as well as a variety of health issues…” (Saewyc, E., et al., 2015). Compared to cisgender, heterosexual people, 2SLGBTQIA and trans people are at an equal or higher risk of experiencing violence (Furman, E., et. al., 2017). Trans people are generally exposed to transphobia, homophobia, fears of being “outed,” higher risks of HIV transmission, and internalized shame (Furman, E., et. al, 2017). An American quantitative study on help-seeking patterns for transgender survivors of IPV explains “Among all transgender participants, IPV survivors were significantly less likely than non-survivors to perceive family, medical doctors, and survivor hotlines as helpful [help-giving resources] for other survivors in general” (Kurdyla V., Messinger, A.M, Ramirez, M., 2019). The combination of higher probability of violence and the barriers to accessing services, trans people are highly susceptible to experience GBV/IPV.

Historically, many women’s shelters would not clearly define their policy or procedures when providing service to the trans community, as documented by Ross in the Gendertrash Zine from 1995 and by Janovicek in 2007. Furman, Barata, Wilson, and Fante-Coleman found in their study:

 “All participants felt their organizations could become more inclusive of LGBTQ2S survivors through modifying their organizational policies, practices, and structures. They highlighted the need to hire staff with more diverse lived experiences, and create formal policy changes and procedures to improve the quality of care for survivors” (2017).

It is not surprising policy change has not occurred rapidly, as Lorenzettti, Wells, Logi, and Callaghan surmise in their article, “Researchers have noted, however, that many national government VAW prevention plans do not prioritize or reflect an understanding of DV within GSD communities” (2017). GSD is an abbreviation for gender and sexual diverse people and is used in place of 2SLGBTQIA and trans. Insufficient training of staff and slow policy changes within organizations act as a structural barrier, hindering safety of “GSD” communities to access GBV/IPV services (Lorenzetti, L., et. al., 2017).

Structural barriers for accessing service have historically affected Indigenous communities since the creation of the *Indian Act 1876*. The Truth and Reconciliation Commission, which began in 2009, called to action investigations and inquiries into the cultural genocide of Indigenous people in Canada (NTRC, 2015). Action number 41 stated, “[w]e call upon the federal government, in consultation with Aboriginal organizations, to appoint a public inquiry into the causes of, and remedies for, the disproportionate victimization of Aboriginal women and girls” (NCTR, 2015). The Missing and Murdered Indigenous Women and Girls National Inquiry (MMIWG) was launched in September 2016 and created 32 Calls for Justice for the 2SLGBTQQIA community (MMIWG, 2019). The calls for justice encompass policy, programming, education, advocacy, and youth participation (MMIWG, 2019). With the largest Indigenous population in Northwestern Ontario in relation to the rest of Ontario, the 32 Calls for Justice are very important to the inclusion of Indigenous two-spirit and 2SLGTBQQIA community members. Call for justice number 18.11 asks that “[w]e call upon all governments, service providers, industry, and institutions to accommodate non-binary gender identities in program and service design, and offer gender-neutral washrooms and change rooms in facilities” (MMIWG Vol. 1b, 2019). The inclusion of non-binary gender identities is highlighted due to the high level of marginalization and the intersectional layers of oppression experienced by Indigenous people (MMIWG Vol 1a, 2019). By responding to the MMIWG Final Report and the 32 Calls for Justice, organizations would be aligning Indigenous 2SLGBTQQIA community needs with greater systemic change.

**Discussion**

 The literature explored for this report provides insight needed to understand that trans people are at risk to experience violence, especially when viewing violence through intersectional perspectives. Cotter and Savage found that men do not experience violence at the same rates as women, as men are more likely to be the perpetrators of violence, therefore the emphasis for advocacy and funding is focused on female survivorship (2018). This trend has not changed dramatically over time and therefore this report is not recommending that funding be shifted, or organizational policies should be changed to accommodate men into female spaces, but it is important to understand what is available for male survivors. As this report is also focused geographically in Northwestern Ontario, the discussion should include the services and programs available. The chart below is a short list of services available for men facing homelessness, sexual or physical assault survivorship, mental health struggles, and poverty in Thunder Bay, ON. Although there are more services across Northwestern Ontario, Thunder Bay is often a hub for service access due to the population density and therefore the services listed is not exhaustive.

Chart 1: List of Programs and Services for Men in Thunder Bay, ON

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| --- | --- |
| **Program or Service** | **Focus of Service** |
| Male Survivor Group  |  - Individual and group counselling (multiple mental health organizations) |
| Thunder Bay Victim Services  |  - Wrap around intervention, safety, food security, health care, mental health, legal system engagement |
| John Howard Society of Thunder Bay |  - Focus on individuals in contact with legal system |
| Thunder Bay Counselling Services |  - Provider of mental health services, including GBV survivorship |
| Thunder Bay Regional Health Sciences Centre (Adult Mental Health Unit) | - Adult and youth mental health services, in and out-patient |
| Faye Peterson |  - Caring Dads: men’s group support single fathers |
| Private Practices  |  - Multiple private mental health practitioners offer counselling |
| Shelter House |  - Short-term housing accommodation, food security, transitional housing support |
| Salvation Army Thunder Bay |  - Short and long-term transitional housing to escape poverty, homelessness due to mental health, addiction, violence |
| Crisis Response – Canadian Mental Health Association |  - Emergency crisis line with connections to police and mental health services |

The services that operate within Thunder Bay, ON and the District are focused on men as a gender but are not centred around one’s gender and sexual identity. 2SLGBTQIA community organizations are largely online, and social media based and focus on one’s social connections to community. Thunder Pride Association is an organization based on creating a safer community for 2SLGTBQIA people and focused on building connections through social events and yearly Pride celebrations (2021). Although social connectedness is an important determinant of health, it may not be where trans people go to escape intimate partner violence.

 For trans community members to access gender-based violence or intimate partner violence services, they must define their gender as male or female to gain access. The inclusiveness of an organization, albeit legislated through multiple acts of law, may not be universally applied. The Salvation Army, which provides many services to men, has a religious component that has a history of homophobia and transphobia (Jones, Z., 2013). Despite the more recent apology and acceptance of 2SLGTBQIA clients and staff, the reputational damage acts as a barrier for those in the community (Ennis, D., 2020). Having to declare your gender identity to access anti-violence services means that trans people are constantly “outing” themselves and putting themselves in potentially dangerous situations, whether it be from staff prejudice or violence from other clients (Denomme-Welch, Pyne, Scanlon, 2008). Without 2SLGBTQIA specialized services for trans people experiencing violence, then community members are left to engage in unsafe places.

 The geographic area of Northwestern Ontario encompasses over 526,000 squared kilometers and has a population density of 0.4 people per square kilometer (Statistics Canada, 2016). Compared to the rest of Ontario, this means Northwestern Ontario contains more than half of the physical geography and only 1.72% of the provincial population (Statistics Canada, 2016). According to the results from the Canadian Community Health Survey in 2015, 1.7% of Canadians considered themselves to be homosexual (Statistics Canada). Together, these statistics point that Northwestern Ontario is home to a relatively small 2SLGBTQIA community when compared to the rest of Ontario, and to Canada. This does not diminish the needs of the 2SLGBTQIA community but underlines the importance of inclusive services when there are only so many resources in the community to provide specialized care. The Ontario Provincial Budget for 2020 outlined $2.5 million in a new grant fund called the Victim Support Grant. This money is meant to “fund partnerships between police services and community groups to fill existing service gaps” (Ontario Budget, 2020). This funding is not intended purely for 2SLGTBQIA community members and therefore must be used to service all members of society. With a relatively small proportion of 2SLGBTQIA people needing gender-based violence services, it will be up to leadership in local organizations to prioritize trans people experiencing violence.

 As discussed above, women’s shelters across Ontario are shifting organizational policy to be more inclusive of transwomen and transmen. In Northwestern Ontario, there are no 2SLGBTQIA focused gender-based violence services and organizations must adapt to become inclusive of the trans community. FAYE, an emergency shelter for women escaping violence, (among other services), has evolved from a second-wave feminist approach to exploring how to serve the 2SLGBTQIA community. The Ontario Association of Interval and Transitional Houses, which coordinates provincial strategies for emergency shelters for gender-based violence organizations, has released new mission and vision statements on inclusive 2SLGBTQIA services, including transmasculine survivors (2021). The vision statement reads “An Ontario that is safe, equitable and just for all women, girls and gender-diverse communities” (OAITH, 2020). The inclusion of gender-diverse communities as part of service provision is important for Northwestern Ontario and FAYE has been exploring the expansion of services in line with the direction of OAITH.

 With the evidence provided thus far, there are multiple avenues to support trans inclusion into gender-based violence, specifically intimate partner violence, shelter services. The following recommendations are informed by the analysis explored in this report and are supported by recommendations made in *Invisible Men* and the FORGE *Trans-Inclusion in Domestic Violence Shelters: Tipsheet #1* (Denomme-Welch, Pyne, Scanlon, 2008; Cook-Daniels, L., Munson, M, 2015).

**Recommendations**

The following recommendations are informed by the literature in support of trans inclusion in feminism, expressed need to address the vulnerability of the trans community, and the deep intersections affecting two-spirt and Indigenous people. The recommendations are for increased organizational capacity to support trans and 2SLGBTQIA people in program development, increase promotion and community awareness of trans-inclusive services, continued education and training for staff and community, and the hiring of trans and 2SLGBTQIA people into shelter organizations.

#1)

 Women’s shelters should address operational and board policy gaps when evaluating masculine transgender, non-binary, and two-spirit access to GBV/IPV services with the support of members from those communities.

 Specifically:

 - Intake forms should allow for self disclosure of gender identity without being a barrier to entry into service

 - Boards and staff should be informed on relevant data on the dangers faced by the trans and two-spirit community and draft policies to address their needs

- Shelter organizations should develop an inclusive policy on trans access and advocate for the trans community when addressing GBV/IPV

- Invite trans and two-spirit community members to participate in coordinating committee tables

 Women’s shelters have capacity to provide services for survivors of GBV/IPV and are more widely available in most communities. Men’s shelters, particularly ones that deal with male survivors, do not exist in the same frequency and would not have capacity to receive men from all over the province. Trans, non-binary, and two-spirit people experience GBV/IPV and without adequate training for staff and board members, policy and procedures can not address the service needs of the community. It can better serve an organization to include trans, non-binary and two-spirit people in hiring, board work, policy development, and program development to increase the visibility of the community and improve access to shelter services.

#2)

 Women’s shelters should partner with 2SLGBTQIA and trans organizations to promote trans inclusion and advocacy.

 Specifically:

 - Shelters should participate in Pride events, digitally or otherwise, and communicate the inclusivity of their organization with the greater community

 - Shelters should partner with 2SLGBTQIA and trans organizations to educate people in those communities about GBV/IPV and how to recognize dangerous situations and patterns

 - Shelters should practice active allyship by putting resources into community activism and promoting human rights

By partnering with 2SLGBTQIA and trans organizations, the organization can connect with community members, address barriers to service and promote inclusion to the greater community and foster safer spaces.

#3)

 Men’s shelters should develop safety protocols that prioritize trans access to shelter spaces.

 Specifically:

 - Men’s shelters should hire diverse staff and recruit diverse board members from the trans and two-spirit communities

 - Men’s shelters should develop inclusive policy to allow safety for trans people while accessing shelter services

 - Men’s shelters should educate all staff on feminist anti-oppression/anti-racist approaches to violence, poverty, and substance use

Men’s shelters that provide GBV/IPV services are limited in capacity due to the lack of organizations providing them. They are not connected to the same network of women’s shelters and do not have the same presence in the system.

#4)

 Men’s shelters should address patriarchal and male violence with people who have perpetrated violence and those who are targets of violence.

#5)

 Research should be conducted in Northwestern Ontario into 2SLGBTQIA and trans livelihoods of living in rural, remote communities, and urban areas.

**Conclusion**

This report found little direct evidence or information for Northwestern Ontario when addressing the gaps in service and policy for masculine trans, non-binary and two-spirit people. The intersectional oppressions of living rurally, being subject to racism, transitioning, or identifying as non-binary or two-spirit are difficult to quantify, but the research that is available points to the underservice and danger people in this community face. This report serves as a beginning to the understanding of the needs of 2SLGBTQIA survivors of gender-based violence and look towards future solutions in cooperation with these survivors. The appendix below outlines a few actionable items that organizations can begin to implement in order to increase Shelter capacity to help 2SLGBTQIA people.

Appendix

Actionable Service Provisions

1) Offering Crisis intervention via phone line and support counselling

2) Provide appropriate outreach services

3) Access to Family Court Support Work

4) Shelter provided as needed but not in the current configuration of the existing shelter, using a third-party model like motels are used now during Covid-19, with housing staff attached

5) Redesign the physical emergency shelter that provides safety for all clients

6) Ensure second stage housing can be provided as appropriate (May need modification)

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