



**Responses from Disabled Sex, Sexuality and Gender Diverse People:  
Building Rainbow communities free of partner and sexual violence**

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## About the Author

Sandra Dickson is the Project Manager for Hohou Te Rongo Kahukura – Outing Violence. She is a bisexual Pākehā cis woman of Canadian and Scottish descent living in Newtown, Wellington, with a passion for creating communities free of violence.

Sandra has more than two decades' experience of voluntary and paid work to prevent and respond to sexual and family violence. This includes advocacy, policy and education programme development, research, training and project management including national roles for Te Ohaakii a Hine – National Network Ending Sexual Violence Together and Women's Refuge in Aotearoa New Zealand and launching 24 hour support services for migrant women trafficked into the sex industry in London. She has also contributed to developing policy and protocol guidelines to respond to partner violence for New Zealand Police, Child Youth and Family and health providers and in 2013/14 worked inside ACC developing their National Sexual Violence Prevention Plan which included secondary school healthy relationships programme Mates & Dates.

Sandra has also been actively involved inside Rainbow communities, locally, nationally and internationally for more than two decades, primarily through the Wellington Bisexual Women's Group. She has delivered violence prevention programmes with young people from Rainbow communities; run training in working with Rainbow survivors of partner and sexual violence; introduced Rainbow content into mainstream violence prevention work and managed a Refuge safe house for women escaping similar-gender partner violence in London. Her writing appears in the US anthology, *Queering Sexual Violence*, published in 2016, and she wrote the first Hohou Te Rongo Kahukura – Outing Violence report, *Building Rainbow communities free of partner and sexual violence* (2016).

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## Section 1: Introduction – why Hohou Te Rongo Kahukura – Outing Violence?

Sex, sexuality and gender diverse communities are increasingly recognised as vulnerable to intimate partner and sexual violence, but very little is known of specific experiences of people from these communities in Aotearoa New Zealand due to a lack of research and Rainbow specific services.

In recent years there has been a surge in limited, small scale studies in the United Kingdom, Australia and the USA. While most of these studies cannot be used to deduce population scale rates of partner or sexual violence, they consistently demonstrate such violence is a significant issue for the Rainbow community. There are indications across surveys that lifetime sexual violence experience for trans people may reach 50%, and that trans women of colour are most likely to be victimised.<sup>1</sup> Recent national surveys in Australia and the United States indicate rates of partner violence and sexual violence for Rainbow communities are as high<sup>2</sup> or higher than heterosexual people.

Youth 2000 research in New Zealand indicates 32% of same or both sex attracted secondary students report being touched in a sexual way or made to do sexual things they didn't want to do.<sup>3</sup> These rates are higher than those reported by opposite sex attracted female or male secondary school students.

Disabled people are also an under-researched population group in terms of violence in Aotearoa New Zealand and elsewhere, but all indications point to experiences of violence being higher than for non-disabled people. Studies to date generally have not explicitly included gender diverse people, but disabled men experience high rates of violence and disabled women are more likely still to be targeted for violence.<sup>4</sup> The intersection between disability and Rainbow identities is twice under-researched.

The first Hohou Te Rongo Kahukura – Outing Violence report<sup>5</sup> identified high levels of experiencing violence for the people who responded, and a lack of appropriate or safe responses when people tried to seek help. Most often, people were asking friends for support, because they did not think existing services were “for” them. There were explicit fears of discrimination from services, and many experiences of people not receiving the support they needed when they did ask.

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<sup>1</sup> Fileborn, B. (2012). *Culturally Competent Service Provision to Lesbian, Gay, Bisexual and Transgender Survivors of Sexual Violence*, (2009); *Transgender Rates of Violence* (2012); *Responding to Transgender Victims of Sexual Assault* (2014) and *Lesbian, Gay, Bisexual, Transgender, Queer and HIV-Affected Hate Violence in 2014* (2015).

<sup>2</sup> Walters, M.L., Chen J., & Breiding, M.J. (2013). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation*, Centers for Disease Control and Prevention, USA and Leonard, W., Pitts, M., Mitchell, A., Lyons, A., Smith, A., Patel, S., Couch, M., and Barrett, A. (2012) *Private Lives 2: The second national survey of the health and wellbeing of gay, lesbian, bisexual and transgender (GLBT) Australians*.

<sup>3</sup> Le Brun C., Robinson E., Warren H., Watson P.D. (2004), *Non-heterosexual Youth - A Profile of their Health and Wellbeing: Data from Youth2000*. Auckland: The University of Auckland.

<sup>4</sup> See for example Hager, D. (2011), *Finding safety: provision of specialised domestic violence and refuge services for women who currently find it difficult to access mainstream services: disabled women, older women, sex workers and women with mental illness and/or drug and alcohol problems as a result of domestic violence* and Hughes K, Bellis MA, Jones L, Wood S, Bates G, Eckley L, McCoy E, Mikton C, Shakespeare T, Officer A. (2012), *Prevalence and risk of violence against adults with disabilities: a systematic review and meta-analysis of observational studies*.

<sup>5</sup> Dickson, S. (2016), *Building Rainbow Communities free of partner and sexual violence*, Hohou Te Rongo Kahukura – Outing Violence.

There are a number of limitations on the ability of “mainstream” services to respond effectively to both disabled people and Rainbow people experiencing partner or sexual violence. For disabled people, there are access issues in terms of information, communication and physical accessibility. Domestic violence legislation does not currently protect disabled people from abuse from caregivers despite considerable attempts to change this by disability advocacy groups. Services in Aotearoa New Zealand responding to family and sexual violence are also primarily set up to respond to men’s violence against women. They may treat “sex/gender” as binary (only male and female) and immutable (does not change from birth). They are not always experienced as appropriate for many in Rainbow communities. This is particularly true for Rainbow people who are not Pākehā, many of whom may prefer kaupapa Māori or culturally specific services to address violence, and/or Rainbow people with disabilities. A context of limited resources is likely to have contributed to the limitations in services’ responsiveness to Rainbow people and disabled people.

Rainbow communities themselves have low recognition of partner violence and sexual violence as the majority of awareness raising has targeted relationships between men and women and has treated all people as cis, or comfortable in the gender they were assigned at birth. Dynamics of homophobia, biphobia, transphobia and gender policing underpin intimate partner violence and sexual violence in Rainbow communities and must be understood as the cultural scaffolding which enables such violence, as well as making help-seeking difficult and complex. For Māori, Pacifica, Asian or other non-Pākehā people who experience racism both inside and outside Rainbow communities, understanding and responding to gendered violence must include recognising the structural, interpersonal and internalised violence of racism.

Disabled people who identify inside the Rainbow community may be isolated from that community because of accessibility issues, and may not always be able to be “out” as Rainbow inside disability communities either.

This mini-report supplements the first Hohou Te Rongo Kahukura – Outing Violence report *Building Rainbow Communities free of partner and sexual violence* (2016). A full description of the project is given in the first report, including set-up and composition of advisory group members, survey about harmful or abusive experiences of sexual encounters and relationships, details of the 18 community hui held around the country and resources available on the website, [www.kahukura.co.nz](http://www.kahukura.co.nz)

*Building Rainbow Communities free of partner and sexual violence* (2016) analysed all the survey responses we received, for all Rainbow identities. After the report was made public, we received requests to release the data for specific identities and smaller groups for analysis. This was not possible because we had promised those responding their answers would only be seen by the researcher.<sup>6</sup>

We put a call out through our newsletter, GayNZ and other networks asking for requests for more targeted data analysis and received five requests: for asexual people; **disabled people**; by geographic location; trans and gender diverse people, and bisexual/pansexual and other non-monosexual people.

Originally, we intended to apply for funding for this analysis. Once the first stage of this project was finished, the Advisory Group was disestablished and I made the decision not to seek funding, to allow specialist groups working with smaller groups within Rainbow communities to access the very limited pool of funding that exists.

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<sup>6</sup> The survey is available from a link on <http://www.kahukura.co.nz/uncategorized/survey-and-hui/>

This and other reports are a result of many hours of voluntary work by the author, with peer review from Rainbow community members.

This is the report for disabled people, and focuses on survey responses only. Separate reports for trans and gender diverse people and bisexual/pansexual people will also be released. Unfortunately, I cannot provide analysis by geographic location, as information about where people lived was not collected. I also cannot provide data for asexual people because our participant numbers were too small to produce meaningful information and this would risk identifying individuals.

It is important to note that accurate comparisons for different smaller groups of our data is not possible, because the original sample size was not random, and the size of the groups being compared is not large enough. However, this report shows how vulnerable disabled people in the Rainbow community are to experiencing abuse within relationships and sexual encounters, with very high rates of abusive behaviour being reported in every category.

As with the first report, I dedicate this to the people who hosted and came to our hui, answered our survey, email to ask for support or give feedback, published stories about this project in social and other media, and shared our website, factsheets, hui and survey in their own networks – and all Rainbow survivors but in particular disabled Rainbow survivors. I hope it can guide further work to assist organisations and communities in advocating for disabled Rainbow people.

For more information, including links to organisations that can help, please visit [www.kahukura.co.nz](http://www.kahukura.co.nz)

### **Terms used / glossary**

**“Hohou Te Rongo Kahukura”** – recognising we are on Māori land must be central to any project addressing violence in Aotearoa. Colonisation sought to impose British understandings of gender and sexuality on Māori, and in doing so, disrupt the place of takatāpui inside whānau. Hohou Te Rongo Kahukura asks us to cultivate peace based on loving and equitable relationships through strengthening our own social networks – with partners, others in the Rainbow community, our families, whānau and wider communities. Relationships between people and relationships between peoples are fundamental. Hohou Te Rongo Kahukura invites our communities to respect one another for all that we are to create a thriving Rainbow community.

**“Outing Violence”** – homophobia, biphobia and transphobia mean Rainbow relationships and experiences of partner and sexual violence can be marginalised and not seen as important. Outing Violence encourages us all to name and see all kinds of violence towards Rainbow people as unacceptable and asks our community to support each other to resist abuse, live without violence and cultivate peace.

**“Rainbow”** replaced my very Pākehā “queer and trans,” to seek to include all people in Aotearoa New Zealand under the sex, sexuality and gender diversity umbrellas, recognising there is not a perfect umbrella term. Rainbow seeks to include people who identify as aka’vaine, asexual, bisexual, fa’afafine, fakafifine, fakaleiti, FtM, gay, gender fluid, gender-neutral, gender nonconforming, genderqueer, gender variant, hinehi, hinehua, intersex, lesbian, mahu, MtF, non-binary, palopa, pansexual, polysexual, queer, questioning, rae rae, tangata ira

tane, takatāpui, 同志 (tongzhi), trans man, trans woman, transfeminine, transgender, transmasculine, transsexual, vaka sa lewa lewa, whakawahine and more.

**“Sex”** – biological make-up (body and chromosomes). Everyone has a sex. Although there are infinite possibilities of bodies, people are usually assigned either “male” or “female” at birth. Sex is usually determined by a variety of things including chromosomes, reproductive organs and secondary sex characteristics. Intersex is the term used to apply to a wide range of natural bodily variations, and is much more common than typically thought. Some intersex traits are visible at birth while in others become apparent in puberty. Some chromosomal intersex variations may not be physically apparent at all.

**“Sexuality”** – who someone is sexually, emotionally, physically and/or romantically attracted to. Everyone has a sexuality. Sexuality can change over time, for example, someone may be usually attracted to people with similar genders to them, but sometimes also be attracted to people with different genders to them. There are infinite possibilities. For example, takatāpui is a traditional term meaning ‘intimate companion of the same sex.’ It has been reclaimed to embrace all Māori who identify with diverse genders and sexualities.

**“Gender identity”** – how someone identifies their own gender internally – there are an infinite number of possibilities including male, female, both, neither or somewhere in between. Everyone has a gender identity. Gender identity is independent of sexuality. For example, people assigned female at birth for whom “woman” does not fit may describe themselves as FtM, transmasculine or trans men. People assigned male at birth for whom “man” does not fit may describe themselves as MtF, transfeminine or trans women. People who view themselves as neither male or female, both male and female or different combinations at different times may describe themselves as gender non-conforming, genderfluid or genderqueer.

**“Takatāpui”** - traditional term meaning ‘intimate companion of the same sex’. It has been reclaimed to embrace all Māori who identify with diverse genders and sexualities such as whakawāhine, tangata ira tāne, lesbian, gay, bisexual, trans, intersex and queer. All of these and more are included within Rainbow communities.<sup>7</sup>

**“Fa’afafine”** (Samoa, American Samoa and Tokelau), **“Fakaleiti”** or **“Leiti”** (Tonga), **“Fakafifine”** (Niue), **“Aka’vaine”** (Cook Islands), **“Mahu”** (Tahiti and Hawaii), **“Vakasalewalewa”** (Fiji), **“Palopa”** (Papua New Guinea) are all traditional terms for many Rainbow people whom are of Pasefika descent. These terms have wider meanings which are best understood inside their cultural context. For Pasefika Rainbow communities cultural belonging and identity is anchored in genealogy and vā relationships.<sup>8</sup>

**“Rainbow relationships”** refers to any relationship with at least one Rainbow identified person in it. This means Hohou Te Rongo Kahukura – Outing Violence responds to partner violence in similar sex/gender relationships (for all Rainbow people) and different sex/gender relationships (eg for trans, intersex and bisexual people), since transphobia and biphobia also may operate in these relationships. This term replaces “lesbian and gay partner violence” or “same-sex partner violence” which leave many Rainbow identified people and relationships out.

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<sup>7</sup> Takatāpui: Part of the Whānau, (2015).

<sup>8</sup> Strengthening Solutions for Pasefika Rainbow, (2014).

## Section 2: The Recommendations

These recommendations are based on all research undertaken by Hohou Te Rongo Kahukura – Outing Violence including findings from our community hui, survey and advisory group conversations.

### 1. **Include sex, sexuality and gender diverse people’s experiences of partner and sexual violence at strategic, policy and service planning levels.**

Our findings demonstrate that partner and sexual violence are significant issues for people in Rainbow communities, and that existing frameworks and responses are inadequate at best and harmful at worst. In particular, there is an urgent need for:

- a. Explicit inclusion in all victimisation research through consultation with Rainbow communities; asking demographic questions about sex, sexuality and gender identity; and asking questions about experiences of partner and sexual violence that are specific to Rainbow people’s experiences
- b. Explicit inclusion in national violence prevention campaigns of Rainbow people, experiences of violence, and language which does not exclude sex, sexuality and gender diverse people
- c. Explicit inclusion of Rainbow relationships in healthy relationships programmes and resources which are aimed at whole populations, including in school sexuality education
- d. Services planning and funding to include expanding the Rainbow capacity and competencies of existing “mainstream” partner and sexual violence services and responses
- e. Shifts in strategic planning and services which stop treating sex and gender as binary (only male and female) and unchanging from birth. Neither of these things are true, and both harm all Rainbow people, particularly trans and gender diverse people.

### 2. **Relationships with Rainbow communities and training for “mainstream” violence services on preventing and responding to sex, sexuality and gender diverse people’s experiences of partner and sexual violence.**

People in Rainbow communities are highly unlikely to seek help at the moment from “mainstream” violence services as there is a perception they will not receive appropriate responses. When people do seek help, they report negative experiences, most of which are related to homophobia, biphobia and transphobia. “Mainstream” violence services need relationships with their local Rainbow communities so people know where to go to get help, and there is clarity on who will receive help.

### 3. **Training for Rainbow community agencies on preventing and responding to sex, sexuality and gender diverse people’s experiences of partner and sexual violence.**

The Rainbow support sector could provide a bridge to people experiencing or causing partner or sexual violence to seek help. Many Rainbow community agencies have experiences of supporting Rainbow survivors, but the Rainbow sector as a whole lacks appropriate training and tools. Without this training, there is a risk Rainbow groups will not know how to respond safely.

### 4. **Resources for Rainbow communities focused on friends, family and whānau knowing what to do to help**

People in Rainbow communities experiencing violence are far more likely to talk to people they know than anyone else, partly due to barriers noted above. Culturally appropriate and diverse resources which provide tools for friends, family and whānau to support healthy Rainbow relationships will encourage conversations, prevent violence and encourage help-seeking. At the moment, most resources of this nature leave sex, sexuality and gender diverse people out.



**5. Resources which are culturally appropriate and diverse for the many communities inside the Rainbow community which explore healthy relationships and outing violence.**

In our first stage, we created factsheets for survivors of different Pākehā identities. Our community hui resoundingly wanted to see more resources and role modelling of healthy Rainbow relationships, including diverse identities, ethnicities and types of relationships. These must include resources which specifically target coming out and transitioning as key and unique experiences for Rainbow people, and resources which explore Māori, Pacifica and Asian understandings of sex, sexuality and gender diversity and relationships.

**6. Resources which are culturally appropriate and diverse for families, whānau and wider communities to support their Rainbow family members.**

Isolation is a key issue for people from Rainbow communities, and for those experiencing partner or sexual violence it creates an additional barrier in help-seeking and increases vulnerability, especially for young people who may be forced to choose to stay in abusive relationships because families are not safe for them. Supporting families, whānau and wider communities to support Rainbow family members is protective of violence.

**7. Working with Hohou Te Rongo Kahukura – Outing Violence to create a central hub for information, resources and training to raise awareness and improve responses for Rainbow community members experiencing violence.**

Hohou Te Rongo Kahukura – Outing Violence has the community relationships and expertise to develop training, resources and tools identified in this report as the next steps to prevent and respond to partner and sexual violence and ensure there is Rainbow participation in strategic planning and research in these areas. This includes continuing to raise awareness inside the Rainbow community.

### Section 3: The Survey: Introduction

The Hohou Te Rongo Kahukura – Outing Violence survey was developed through drawing on international violence surveys, surveys specifically targeting sexuality and gender diverse populations, our analysis of existing research about partner and sexual violence in Rainbow communities and discussions and feedback from the Hohou Te Rongo Kahukura – Outing Violence advisory group about community experiences.<sup>9</sup>

The resulting survey<sup>10</sup> included an introduction page explaining the purpose of the survey, who it had been developed by, who it was open to, what kinds of questions would be asked and when, how long it would take, and how the information would be stored and analysed. There were also points throughout the survey referring people back to information about helping services, including on the front page. Specifically, the front page, and all communications about the survey made it clear it was for all Rainbow identified people in Aotearoa New Zealand over the age of 16, not only those who recognised they had experienced some form of partner or sexual violence.

The survey asked general information about age, identity, ethnicity and disability status, then moved on to ask about experiences in intimate relationships; unwanted sexual experiences; the effects of any abuse; and what any help-seeking experiences were like.

Due to resourcing, we utilised a snowball online survey technique rather than the vastly more expensive random sampling. This technique has proven effectiveness with hard to reach populations, including the Rainbow community,<sup>11</sup> and involved promoting the survey through Rainbow online, print, radio and social media, and using the advisory group members as “champions” to ensure various groups in the Rainbow community were aware of the survey. It was also promoted through the community hui road trip. However, snowballing means it is unclear whether people responded to this survey because they were more likely to have experienced partner or sexual violence than the average person in the Rainbow community. This means the results are indicative rather than a reliable guide to population prevalence rates.

The survey was available online from 8 September 2015 until 8 January 2016 (four months). It was answered by 407 respondents. Not all respondents answered every question. This mini-report focuses on all respondents who self-identified as having a health condition or difficulty (lasting six months or more) with seeing, hearing, walking, lifting or bending, learning or communicating with others and socialising. In total, this included responses from 159 people which is 39% of our sample, significantly higher than the NZ Census rate of 24%.<sup>12</sup>

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<sup>9</sup> For survey questions, see Leonard, W., Mitchell, A., Patel, S., and Fox, C., (2008), *Coming forward: The underreporting of heterosexist violence and same sex partner abuse in Victoria*, The Australian Research Centre in Sex, Health & Society, La Trobe University; Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R., (2011), *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; Walters, M.L., Chen J., & Breiding, M.J. (2013), *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

<sup>10</sup> Questions are available from a link on <http://www.kahukura.co.nz/uncategorized/survey-and-hui/>

<sup>11</sup> Lavender Islands: The New Zealand Study, (2007).

<sup>12</sup> NZ Census data, 2013.

## Section 4: The Survey: Demographic Findings for Disabled People

The Hohou Te Rongo Kahukura – Outing Violence survey began by asking questions about demographics, including general information about age, identity, ethnicity and disability status. The ability to identify in respondents’ own words was offered for many questions. For disabled respondents, the age group most likely to answer our survey were 19-24 year olds, perhaps reflecting the significant support we received from the Rainbow support sector working with young people. The next most common age range was 30-39 year olds.

**Table 1: Demographics by Age – Disabled People**

Answer Options	Responses (n=159)	Percentage
16-18	15	9
19-24	53	33
25-29	28	18
30-39	36	23
40-49	12	8
50-59	14	9
60-69	3	2
70 or older	1	1

Respondents were offered three options in terms of intersex status. In the overall sample, eight people knew they were intersex. Five of these people also identified as disabled.

**Table 2: Intersex Status – Disabled People**

Are you intersex?	Responses (n=159)
Yes	5
No	124
Don't Know	30

For gender, sexuality and ethnicity, respondents could select as many terms as they wished, and for all of these questions, many selected multiple responses. Disabled respondents gave 221 responses to gender identity and there were a wide variety of gender identities amongst this group. People were three times more likely to be female than male, and nearly a third identified as non-binary/genderfluid.

**Table 3: Preferred Gender – Disabled People**

Answer Options	Responses (n=221, from 159 respondents)
Takatāpui - all Māori with diverse gender identities and sexualities	13
Whakawāhine	2
Tangata ira tāne	1
Female	89
Male	25
Transgender	35
Non-transgender	5
Non-binary/genderfluid	51

For sexuality, 159 disabled respondents answered the question and gave 204 responses. Respondents were most likely to identify as “Bisexual/Pansexual” closely followed by “Queer.” The most popular self-definition different from those offered was asexual, chosen by four respondents.

**Table 4: Sexuality – Disabled People**

Answer Options	Responses (n=204, from 159 respondents)
Takatāpui - all Māori with diverse gender identities and sexualities	14
Lesbian	41
Gay	23
Bisexual/Pansexual	60
Straight/heterosexual	10
Queer	52
Asexual	4

For ethnicity, 159 disabled respondents answered the question and gave 202 responses, with multiple selections relatively common as well as people self-identifying ethnicities which were not listed. These figures show a wide range of ethnicities of people living in Aotearoa New Zealand answered the survey. Comparison percentages from the last New Zealand Census are provided in brackets if comparison is possible.<sup>13</sup>

**Table 5: Ethnicity – Disabled People**

Answer Options	Responses (n=202, from 159 respondents)	Percentage
Māori	32	20.1% (15.6%)
Pākehā/New Zealand European	132	83% (74.6%)
Asia	11	6.3% (12.2%)
Pacifica	10	6.9% (7.8%)
Other European	17	11%

In terms of disability, 159 respondents identified 266 ways in which they had experienced a health condition or disability which caused them difficulties lasting six months or more. Many disabled respondents had multiple areas in which they experienced difficulties. The most common difficulties were with learning, concentrating or remembering; or communicating, mixing with others or socialising.

**Table 6: Health Conditions and Disabilities – Disabled People**

Answer Options	Responses (n=266)	Percentage
Seeing, even when wearing glasses or contact lenses	21	13%
Hearing, even when using a hearing aid	12	8%
Walking, lifting or bending	35	22%
Using your hands to hold, grasp or use objects	14	9%
Learning, concentrating or remembering	81	51%
Communicating, mixing with others or socialising	103	65%

<sup>13</sup> Source from New Zealand Statistics website, 26 April 2016.

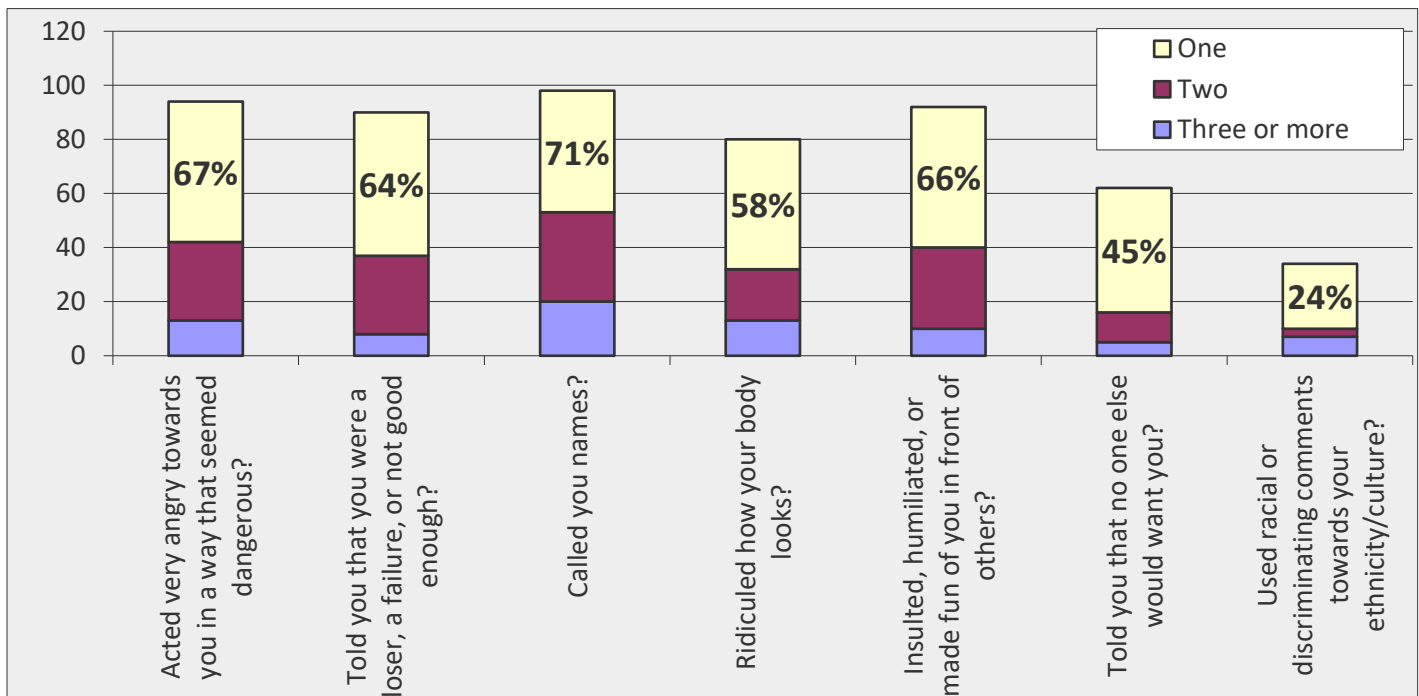
## Section 5: The Survey: Experiencing Abuse within Relationships

The next survey section was introduced by telling respondents questions would be asked about non-sexual behaviour they may have experienced in romantic, dating or sexual relationships, from a partner with any gender identity. Respondents were asked how many partners had done specific things, and offered the chance to answer None, One, Two or Three or More. The following graphs will illustrate responses from these questions from the disabled respondents who answered these questions. Not every respondent answered every question. The percentage figure at the top of each category illustrates how many disabled respondents from those who answered experienced this behaviour from **at least one** of their partners.

It is important to note here that we cannot provide accurate comparisons of different subsets of our data, because the original sample was not random, and the size of the groups we are comparing is not large enough. However, the following graphs show disabled Rainbow people reporting very high rates of abusive behaviour in every category.

Categories in Chart 1 describe actions that are usually considered Emotional, Verbal or Psychological Abuse, particularly when they are repeated over time or are part of other kinds of controlling or coercive behaviour. These forms of abuse may have a negative impact on self-esteem and confidence and lead to depression, anxiety or even suicidality. Nearly three quarters of the disabled respondents had experienced name-calling from at least one partner; two thirds had been told they were a loser or experienced humiliating and insulting behaviour or frightening displays of anger. More than half of disabled respondents were ridiculed about their body by at least one partner and slightly less than half had been told no one else would want them. Racial abuse was experienced by nearly one in four disabled respondents.

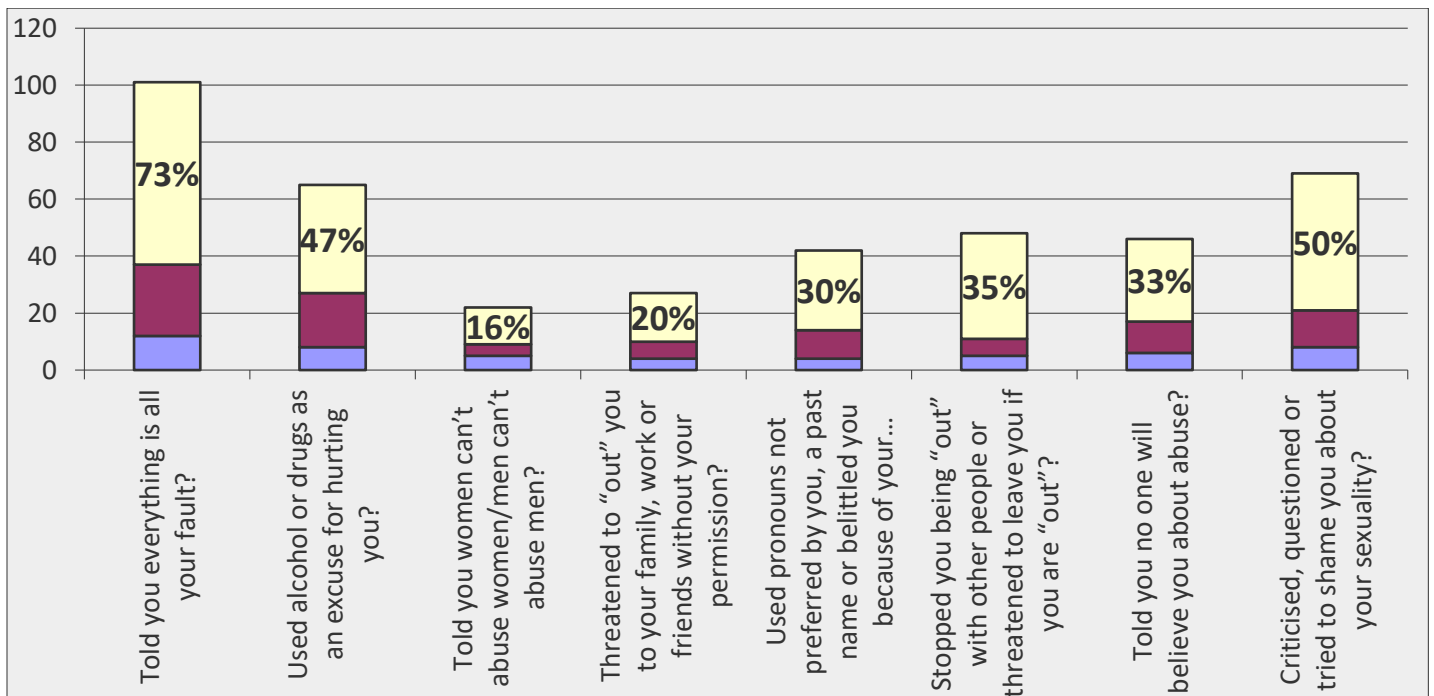
**Chart 1: Emotional, Verbal and Psychological Abuse: How many of your partners have.....**



Categories in Chart 2 describe behaviours that are usually considered Psychological Abuse or Isolation, particularly when they are repeated over time or are part of other kinds of controlling or coercive behaviour. They commonly have the effect of making people feel like abuse they are experiencing is their fault and reducing their opportunities to seek help – or other opinions – from other people in their life. This makes the partner using the abuse more powerful. Nearly three quarters of those answering this question had been blamed by at least one partner for everything going wrong in their relationship and half had a partner use alcohol or drugs as an excuse for abusive behaviour. One in three were told no one would believe them about abusive behaviour.

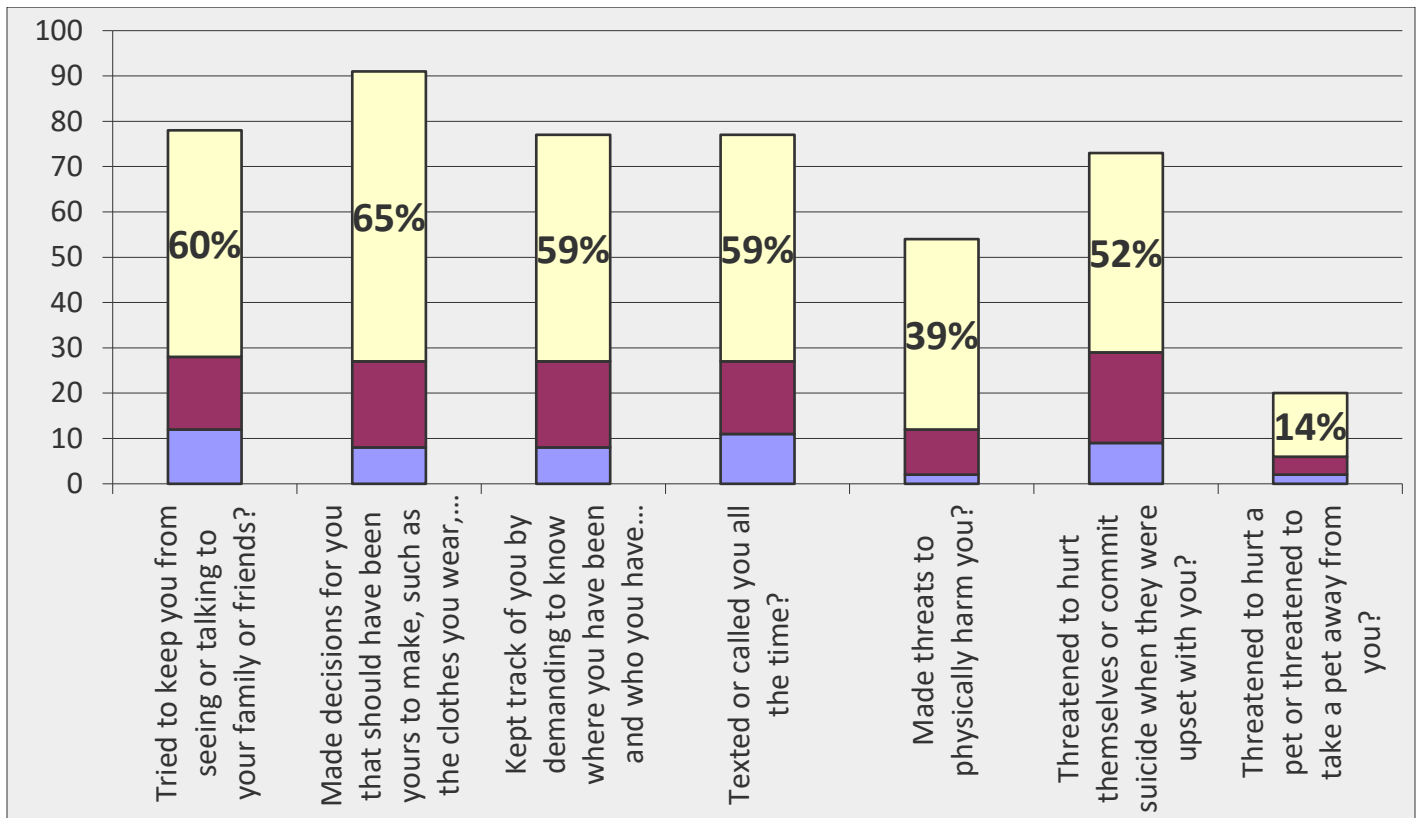
Many forms of psychological abuse and isolation are specific to people in Rainbow communities. Half of the disabled people responding were criticised about their sexuality or gender identity by at least one partner; just under one in three had partners used pronouns or names which were not preferred (eg calling a trans woman “he”, or using her old name). One in five disabled people were threatened with being “outed” by at least one partner in situations like work or family. It is interesting to note that this is featured as perhaps the only significantly different aspect of partner violence in Rainbow relationships in most overseas resources and research which has been developed. Our research, however, identified having a partner who tried to stop them being “out” or open about their sexuality or gender identity was significantly more common, experienced by one in three disabled respondents. This kind of isolation – not being able to talk to other people from the Rainbow community – is likely to severely restrict opportunities to discuss relationships, since Rainbow people are unlikely to talk about relationship difficulties or violence and abuse in many other contexts. Finally, one in six disabled people responding were explicitly told by at least one partner that similar sex partner violence was impossible, ie that partner violence is only used against women by men.

**Chart 2: Psychological Abuse and Isolation**



Categories in Chart 3 describe behaviours that are usually considered Isolation, Controlling or Threatening Behaviours, particularly when they are repeated over time or are part of other kinds of controlling or coercive behaviour. They have the effect of reducing help-seeking options and reducing someone’s power, options and sense of self in a relationship. For disabled people, who may face restrictions on support due to lack of accessible information, communication and physical accessibility, such behaviours may have even more impact.

**Chart 3: Isolation, Controlling and Threatening Behaviours**



Nearly two-thirds of disabled respondents experienced a partner making decisions for them, and more than half reported at least one partner keeping track of them, texting or calling all the time, trying to stop them seeing people important to them, or threatening to kill themselves when they were upset. Given the rates of self-harm and suicidality in Rainbow communities, this is likely to be particularly frightening.<sup>14</sup> One in three disabled respondents had experienced at least one partner threatening them with physical harm, and one in seven had been threatened with harm towards a pet.

Categories in Chart 4 describe behaviours that are usually considered Threats and Violence, particularly when they are repeated over time or are part of other kinds of controlling or coercive behaviour. They have the effect of introducing fear into a relationship, of harm to the person, their property, or people they care about.

More than one in three disabled respondents had experienced at least one partner stopping them going out or destroying something that was important to them. One in three had been kept from having money for their

<sup>14</sup> See, for example, Ara Taiohi Sexuality and Transgender Infographics.

own use. One in four disabled people had been threatened with harm like “if I can’t have you then no-one can.” Other threats received included threats to loved ones or actually hurting loved ones, experienced by just under one in five disabled people, or threats to take children away, experienced by one in ten disabled respondents.

**Chart 4: Threats and Violent Behaviour**

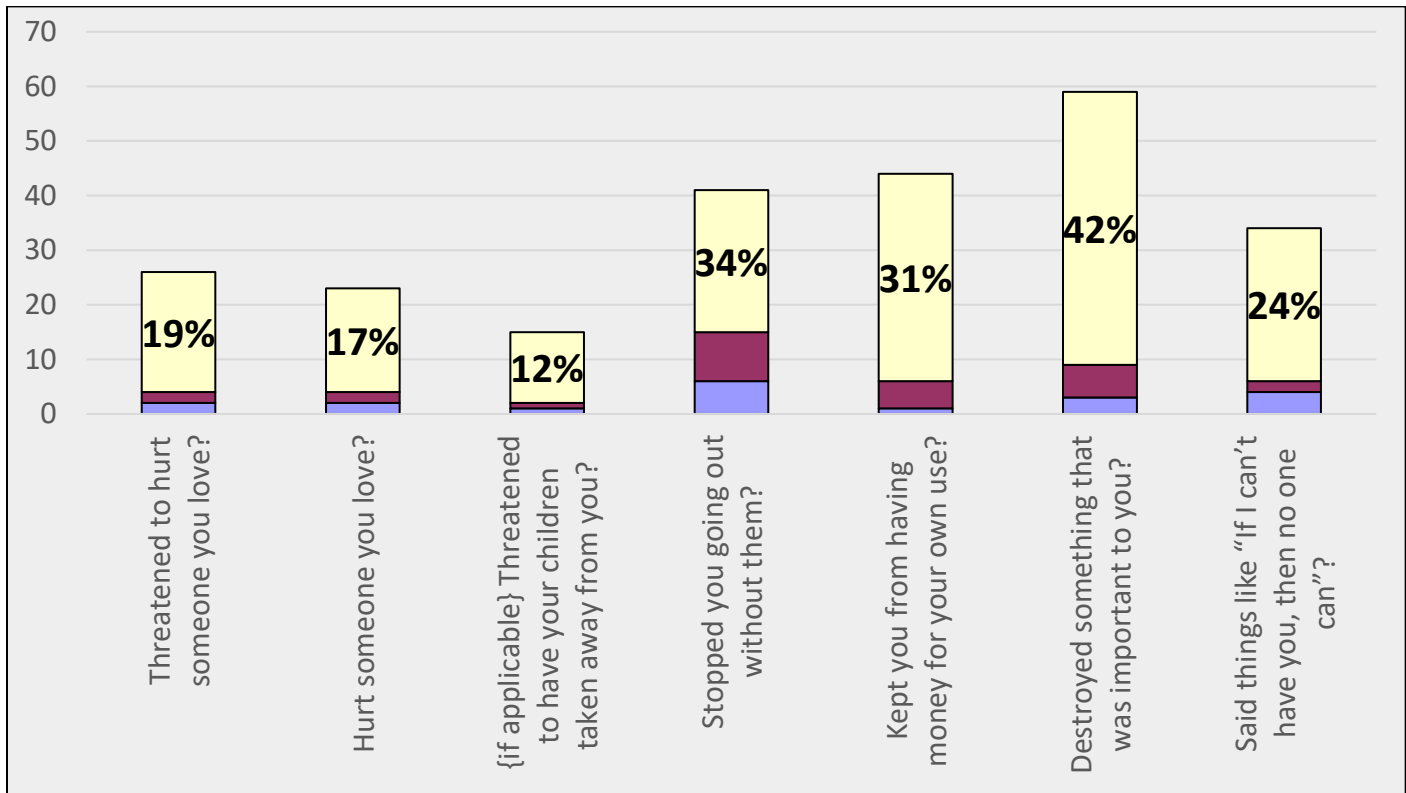
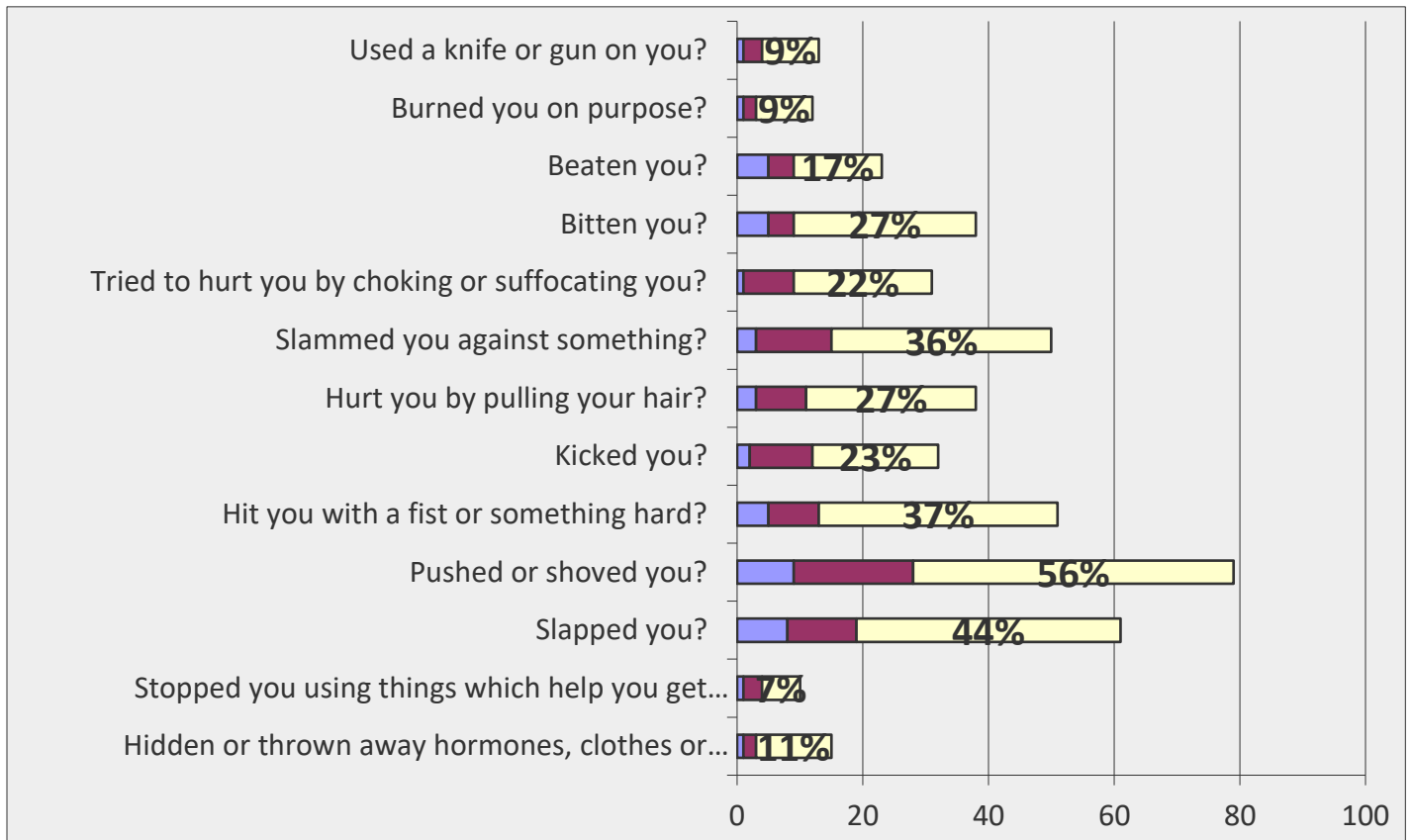


Chart 5 lists responses to questions about physical violence from partners directed towards disabled people answering the survey. Consistent with other research, these rates are lower than rates of psychological abuse, isolation, coercive and controlling behaviour and threats. However, there was still evidence of high and very concerning levels of violence.

Half of disabled people answering the survey had been pushed or shoved by at least one partner and just under half had been slapped. More than one in three disabled respondents had been hit with a fist or slammed into something hard. One in four had been kicked, had their hair pulled or been bitten by at least one partner. One in five disabled respondents had experienced at least one partner trying to choke or suffocate them. Just under one in five disabled people had been beaten and one in ten people had experienced a partner hiding or throwing away hormones or gender affirming equipment. Being burnt on purpose, or having a knife or gun used was experienced by just under one in ten disabled respondents, and 7% had had disability aides taken away by at least one partner.



**Chart 5: Physical Violence Towards Partner**

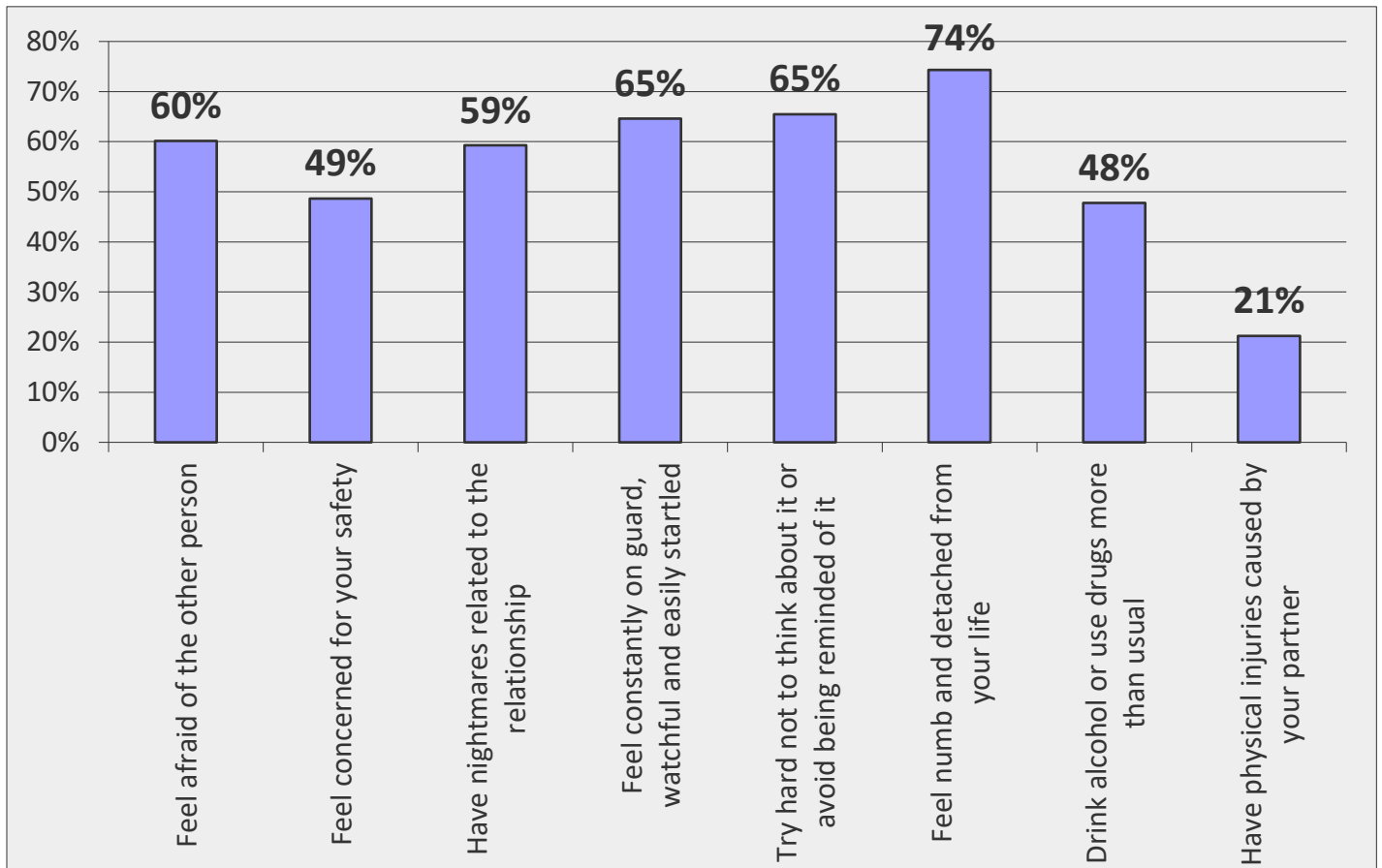


In summary, Charts 1-5 reveal concerning levels of partner violence were experienced by disabled respondents. Some behaviours were generic, and might be experienced in any relationship that was abusive, but many behaviours have specific meanings in Rainbow relationships (eg gender affirming equipment being hidden or thrown away, criticisms of sexuality or gender identity, or isolation from peer support through putting pressure on people not to be “out”). The removal of disability aides that help people walk or communicate are specific for disabled people of all sexes, sexualities and genders. The results above clearly identify disabled people inside the Rainbow community as a population group that desperately needs resources around preventing and recovering from partner violence.

People who had experienced partner violence were asked to rate the impacts of that violence – either while in the relationship or after leaving - in the **most recent** experience of an abusive relationship. This question was answered by 113 disabled respondents.

Consistent with the overwhelming evidence of partner violence and harm, three quarters of disabled respondents reported feeling numb and detached. Two thirds tried really hard not to think about it or reported being constantly on guard. Just under two thirds were afraid of their partner or experienced nightmares. Just under half of disabled respondents used alcohol or drugs more than usual to cope with impacts, or felt concerned for their safety. One in five disabled people answering this question sustained physical injuries from their most recent abusive relationship.

**Chart 6: Impacts of Partner Violence**



## **Section 6: The Survey: Unwanted Sexual Activities**

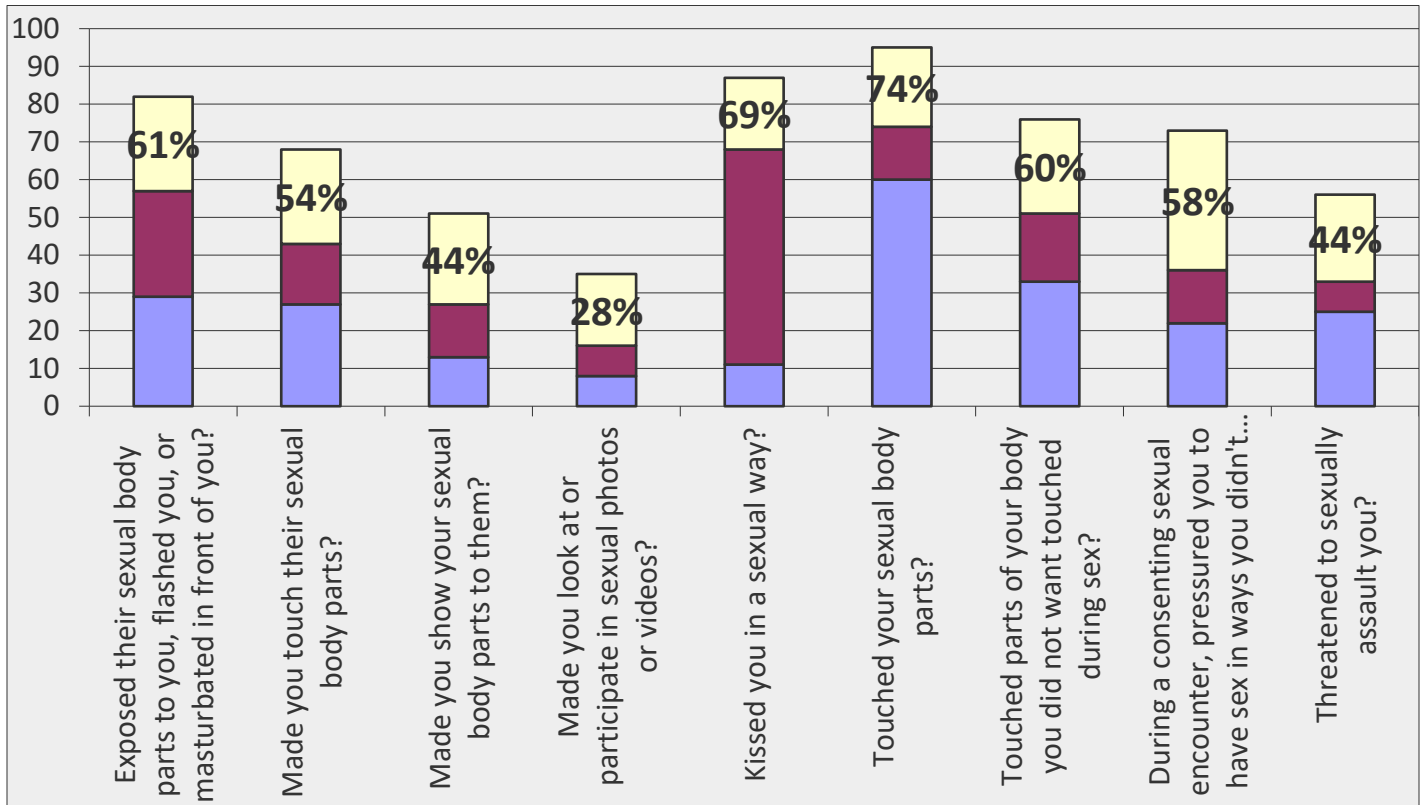
The next survey section focused on “sexual things that you did not want to happen” from a partner, family member, someone you knew, or a stranger. Respondents were asked how many people had done specific things, and offered the chance to answer None, One, Two or Three or More. Not every respondent answered every question. The percentage figure at the top of each category illustrates how many respondents experienced this behaviour from **at least one** person.

Chart 7 shows unwanted sexual behaviour which does not involve penetration. Many of these activities meet definitions of crimes in Aotearoa New Zealand, and the levels reported in our survey by disabled people who answered these questions are very high. Not only are the figures high for people experiencing these behaviours from at least one other person, but significant numbers of disabled people are reporting experiencing many different kinds of unwanted sexual behaviour from multiple perpetrators.

Three quarters of disabled people answering this question reported unwanted touching of sexual body parts; nearly half of respondents had experienced this from at least three people. Two thirds had been kissed in a sexual way when it was unwanted; more than half had experienced this from two or more people. More than half disabled people responding had been touched in places they did not want to be touched or been pressured to be sexual in ways they did not want during otherwise consenting sexual encounters, with at least one in five

people experiencing these behaviours from three or more people. More than half had experienced someone flashing or masturbating in front of them or been forced to touch someone else’s sexual body parts, and just under half had been forced to show their own sexual body parts to someone else or received threats of sexual assault. One in five disabled people had been threatened with sexual assault by three or more people. Just over one in four had been forced to participate in sexual videos or pictures without their consent.

**Chart 7: Unwanted Sexual Behaviour**

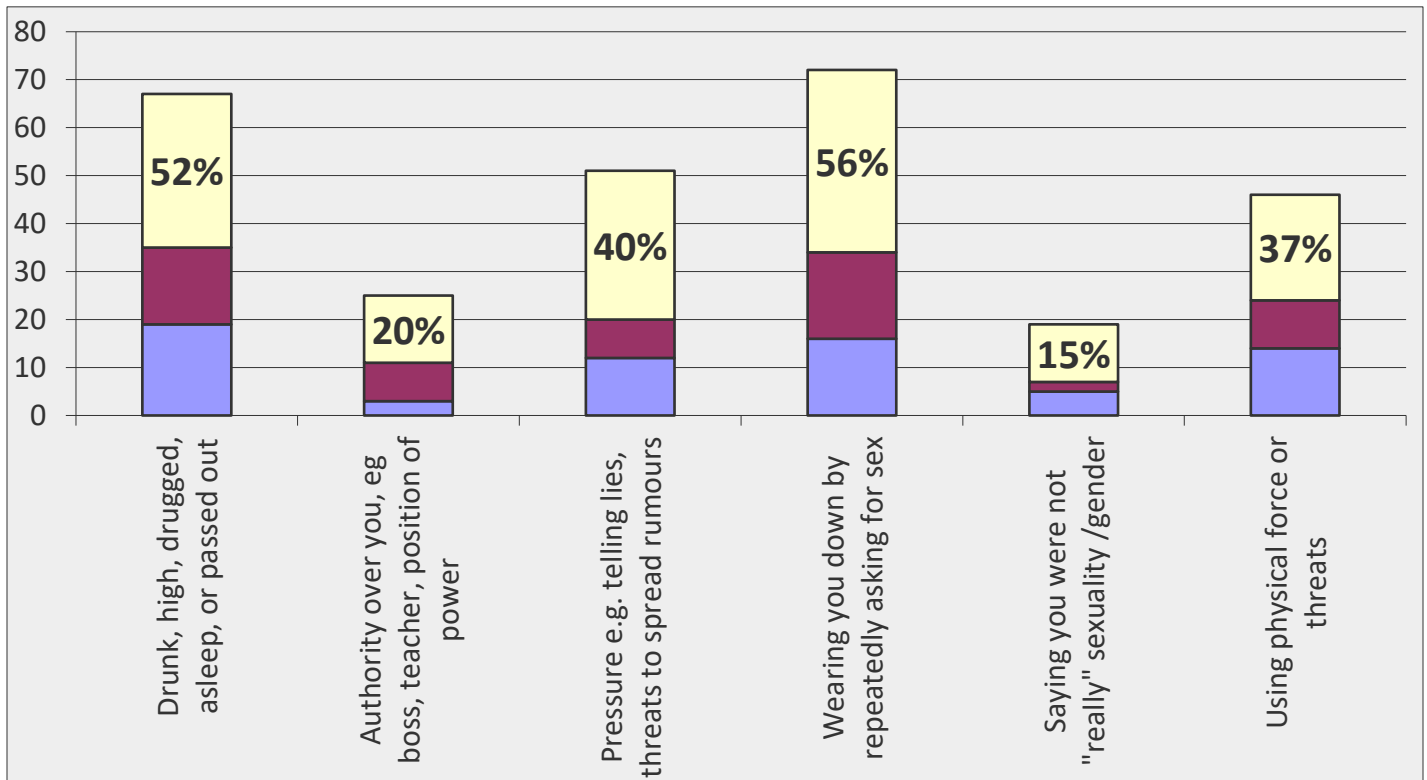


The next set of questions covered activities which fall under rape or unlawful sexual connection in New Zealand criminal law. Respondents were asked how many people had made them perform or receive unwanted oral, anal or vaginal penetration in various circumstances. The results are shown in Chart 8.

More than half of disabled respondents were forced to perform or receive these kinds of penetration by being worn down with repeated requests or when they were drunk, drugged, asleep or passed out. Just over one in three disabled people were pressured by someone threatening them with negative consequences (eg spreading rumours) if they did not give in, and one in three were subject to physical force or the threat of physical force. One in five disabled respondents were forced into these kinds of unwanted penetration by someone misusing authority over them (eg an employer or teacher). Just under one in six disabled people were pressured to be sexual in these ways by someone telling them this was expected behaviour for their sexual or gender identity.

As with the first set of questions about unwanted sexual behaviour, these figures demonstrate concerning levels of sexual violence for disabled people within the Rainbow community who answered our survey.

**Chart 8: Unwanted Oral, Anal and Vaginal Penetration**



Respondents were also asked their relationship to the person who did the unwanted sexual acts at the time of the incident(s). Multiple responses were possible. This question was answered by 124 disabled respondents, who listed a minimum of 251 perpetrators (this underestimates the numbers of perpetrators due to the survey asking people about “Three or more”).

Nearly two thirds of disabled respondents who answered this question experienced unwanted sexual acts from partners and over a third from friends, or someone they had just met. One in five identified a family member as a perpetrator; it is likely this refers to child sexual abuse. Eight percent experienced sexual violence from a work colleague. While these figures are high, they are consistent with existing knowledge sets which suggest sexual violence is much more likely to be perpetrated by those known to the victim/survivor.

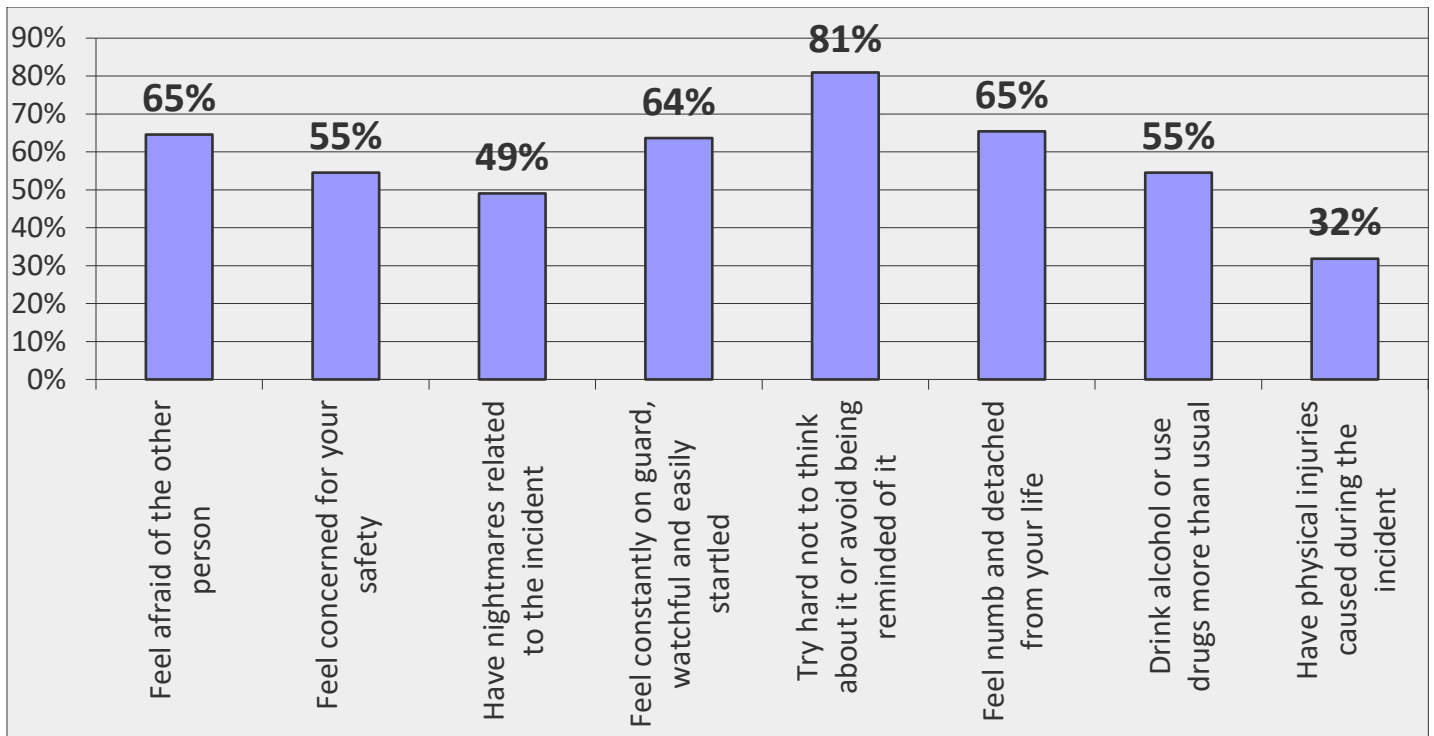
**Table 7: Relationship to Person Perpetrating Unwanted Sexual Behaviour**

Relationship to you when the incident(s) occurred: (n=206, from 91 respondents)	Percentage
Partner, boyfriend or girlfriend	62
Friend	40
Work colleague	8
Someone I'd just met	37
Family member	20
Stranger	35

However, our survey also found that more than one in three of our disabled respondents had experienced sexual violence from a stranger, which is significantly higher than other research in New Zealand.<sup>15</sup> Being targeted for sexual violence because your sexuality or gender identity differs from the “norm” and/or because of disability creates additional, and considerable, risks. Homophobia, biphobia and transphobia provide the context for sexual violence to be used as a punishment towards people who do not wish to, or are not able to, conform.

Finally, people who had experienced sexual violence were asked to rate the impacts of that violence – either during the incident or after it was over - for the **most distressing** unwanted sexual incident they had experienced. This question was answered by 110 disabled people.

**Chart 9: Impacts of Most Distressing Unwanted Sexual Incident**



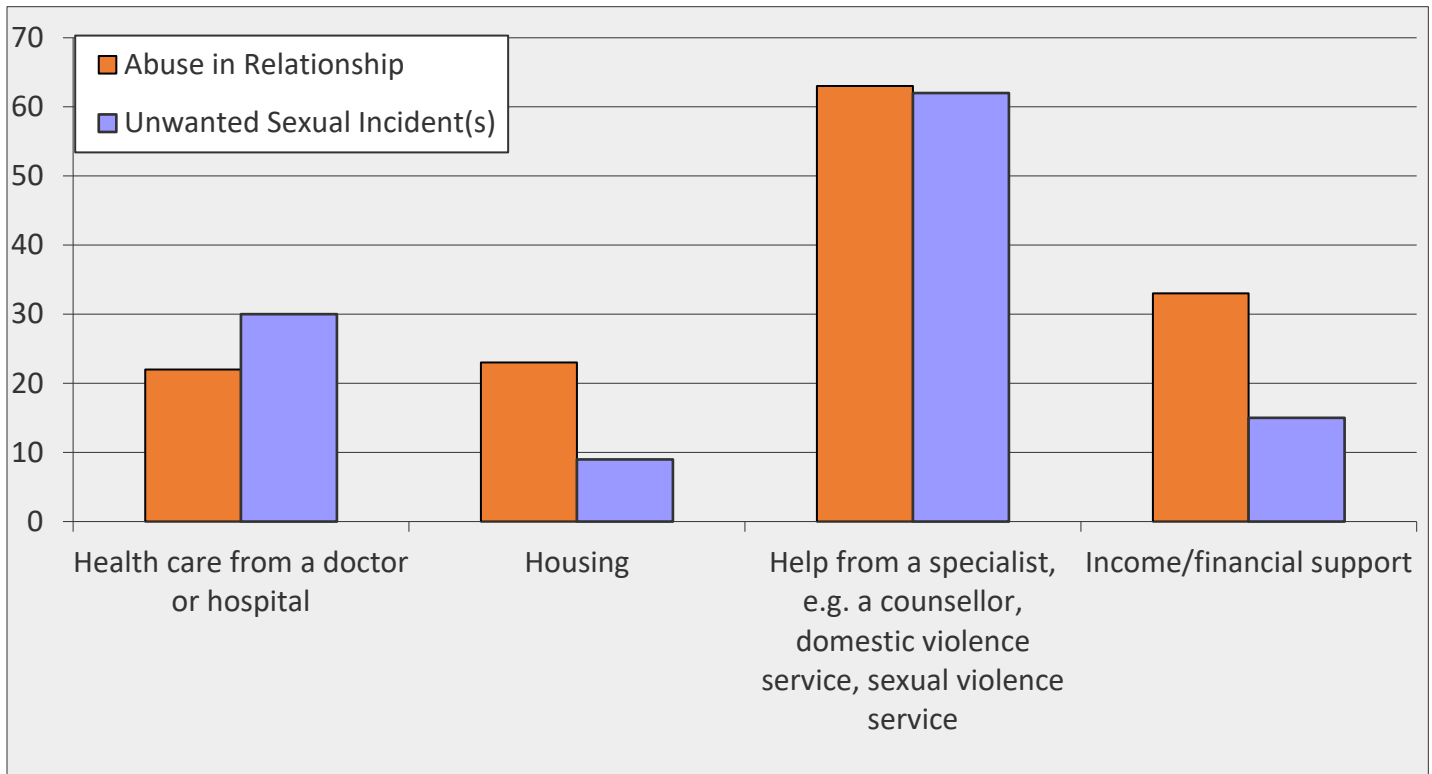
The impacts reported in our survey were consistent with other evidence of sexual violence and harm. Four out of five disabled respondents reported trying not to think about the incident(s). Two thirds of disabled people were afraid of the person, felt numb and detached or were constantly on their guard as a result of unwanted sexual behaviour. Just over half felt concerned for their safety or used alcohol or drugs more than usual to cope with impacts. Just under half of disabled people responding to this question experienced nightmares and one in three people sustained physical injuries from the unwanted sexual incident.

<sup>15</sup> See, for example the Report for the Taskforce on Sexual Violence (2009).

## Section 7: The Survey: Needing and Seeking Help

For both partner and sexual violence, the survey asked respondents if they needed help, whether or not they asked for that help. These questions were answered by 73 disabled people. Significant numbers of disabled respondents indicated they needed help for both kinds of violence. In particular, 91% indicated they needed specialist help from either a counsellor or a specialist sexual violence service for sexual violence and 86% of disabled respondents indicated they needed specialist help for partner violence. Partner violence created larger needs for housing and income and financial support; healthcare was needed by those who had experienced both forms of violence.

**Chart 10: Did you need help, whether or not you sought help?**

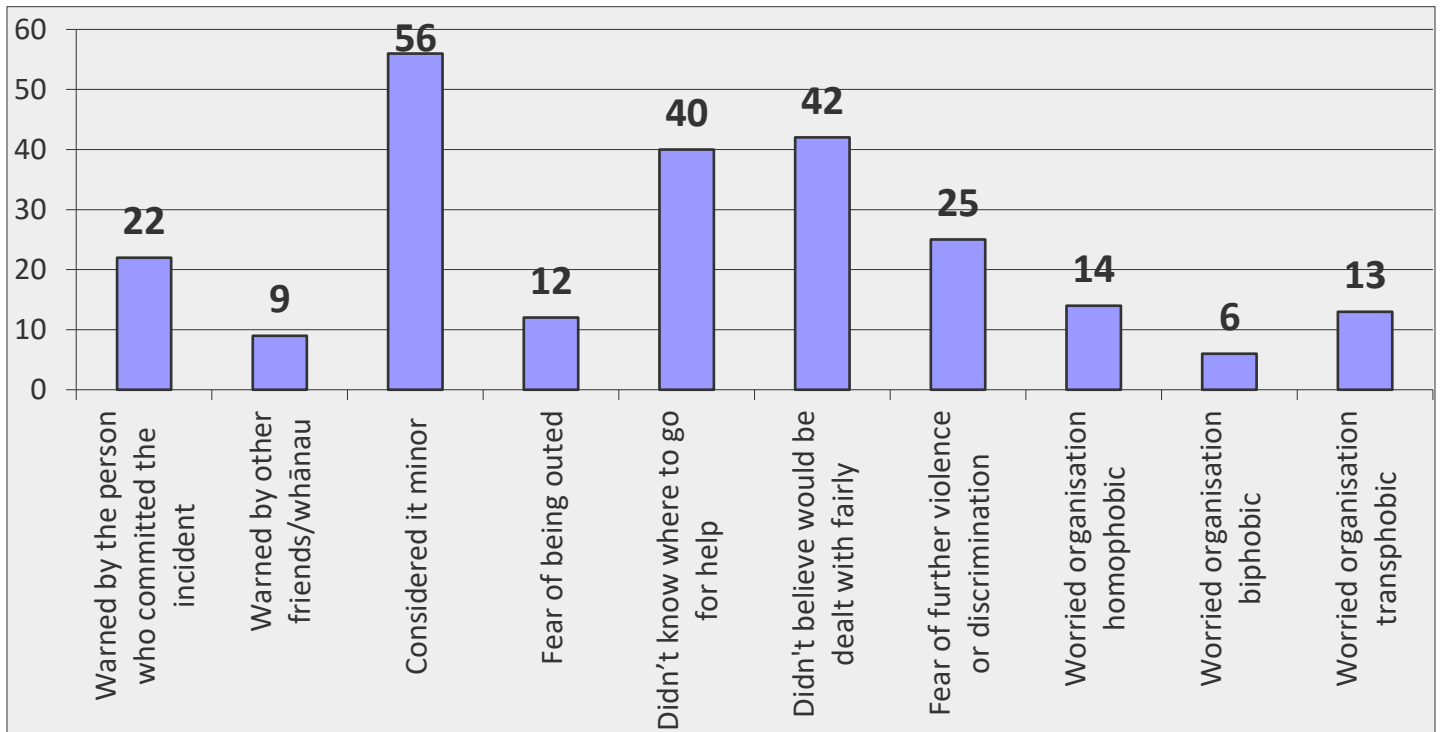


Respondents were asked about help-seeking experiences, and also about the reasons why they had not sought help, if they did not. Chart 11 shows most respondents did not seek help because they considered their experience minor – despite the serious impacts reported earlier in the survey. Minimising violence by survivors is not uncommon; however, for people from Rainbow communities, the additional challenges in recognising partner and sexual violence towards them are likely to be structured by the heteronormativity of dominant images of partner and sexual violence. This theme is explored further in people’s discussions of barriers to seeking help, for which they answer with free text.

The next most common responses were people saying they did not know where to go for help, and did not believe they would be treated fairly. For disabled people, there may of course be additional barriers in help-seeking around accessibility. Disabled people also reported not seeking help because they were worried about further violence and discrimination from services, specific concerns around homophobia, biphobia and transphobia, and concerns they would be “outed” if they sought help.

Finally, as with other survivors, being warned not to seek help by perpetrators or other people connected to the survivor was reported by many disabled respondents.

**Chart 11: If you didn't seek help, why not?**



Respondents were offered the chance to describe in free text what were or are the barriers to asking for help or seeking professional assistance after experiencing partner violence or sexual violence. This question was answered by 73 disabled people, and answers reflected the themes from the graph above, as well as specific commentary about lack of accessibility:

*“Lack of disability related accommodations - Dismissive and abusive behaviour from sexual violence agency [name removed] - Anger and breach of confidentiality by sexual violence agency when asked for disability related accommodations.”*

Disabled respondents were concerned their disabilities would impact on whether services believed them:

*“Didn't think it was a big thing, and I thought I was making it up. People always think I'm overreacting because of my mental illnesses so nobody would believe me.”*

Disabled respondents reported significant levels of shame and blame as acting as barriers in help-seeking. They also often talked about a lack of faith in heteronormative systems understanding sexual and gender diversity:

*“Literally having to explain to professionals the concept of gender and biological sex being separate - Peoples opinions or prejudices affecting my treatment.”*

*"I really think that more visibility around the subject would have helped me so much. If it were spoken about in the media, portrayed on television in some way, if there were resources out there I could have found online. I tried to look it up, but could only find literature aimed at women who had been abused by men, and while I found reading that helpful, and recognize it as so, so important, every time I struck the pronouns he/him/his in that literature, I thought "this is not for me," and therefore, "what was done to me was not abuse, and I have no right to call it that, or seek help for it."*

Many disabled people reported first attempts at help-seeking putting them off, because they were not treated with the respect they needed:

*"When I initially asked for help I wasn't listened to and didn't feel like they cared. It took years before I was able to ask for help again because I feared the same indifference."*

*"Conflicting and apparently incorrect information about which genders fall within their remit. Invalidating/queerphobic treatment (eg referring to my partner as my friend). One sexual violence agency [name removed] explicitly stating they only support binary genders. I respect women only services, but "women and men" is very discriminatory."*

Many disabled respondents talked about being concerned about what would happen to perpetrators, in the context of homophobia, biphobia, transphobia and racism within the criminal justice system and wider society, and the ways people in Rainbow communities are pathologised, particularly Māori, Pacifica and other non-Pākehā people.

The survey then asked, for those who had asked for help, who they had approached. This question allowed multiple responses. Disabled respondents, like other Rainbow respondents, are significantly more likely to seek help from their friends than anyone else. The next most popular group were counsellors. Very few disabled people had attempted to seek help from specialist domestic/partner violence or sexual violence agencies. Just a handful of those who reported they needed specialist help actually sought that help.

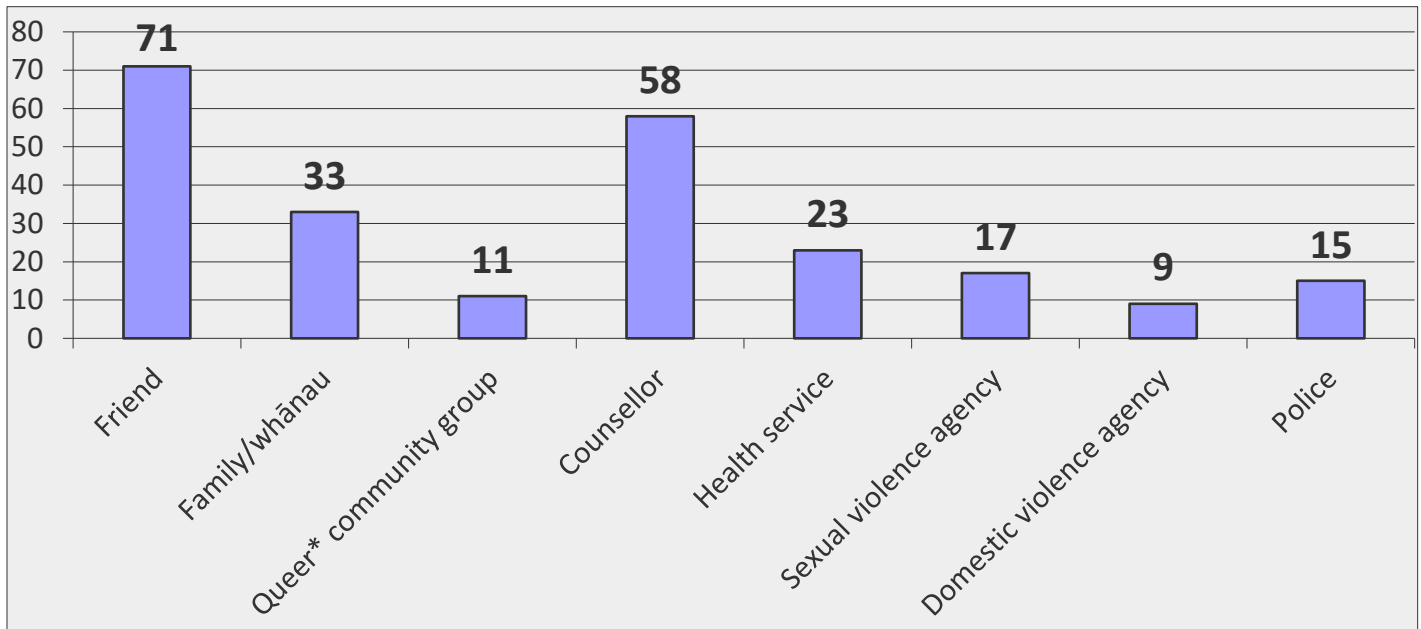
These figures make it extremely difficult for specialist agencies responding to violence to have any real sense of the degree of need for disabled Rainbow survivors, because so few are even attempting to seek help.

It is also clear that few disabled people answering our survey indicated they had sought help from a queer\* community group. This suggests that the Rainbow community is currently aware of just the tip of the iceberg when it comes to partner and sexual violence inside the community. Very few respondents had tried to report to New Zealand Police. Overall, these figures demonstrate that most disabled people inside the Rainbow community experiencing partner or sexual violence are not seeking specialist help, even when they have recognised they need it.



No disabled respondents named disability services in free text as places they had sought help, which again, means their needs are invisible to service providers.

**Chart 12: Actual Help Seeking**



Finally, many disabled people talked about wanting Rainbow specific services and feeling these were critical in order for them to feel like there was somewhere safe to go. The final word:

*“In the years since my relationship ended, I’ve looked for organisations in Aotearoa that focus on same-sex and non-heterosexual IPV and domestic abuse, and felt even more alone when I was unable to find any. It would have been really amazing and empowering to have had a specialized group I could have approached about it, and I know there must be others out there who feel the same. I’ve always wanted to start some kind of group like that, but I never knew how, or if I could, so I just really want to take this time to say that I so appreciate what you guys are doing with this survey. Just hearing about it, that someone out there cares enough to do this, was incredibly validating, and I can’t thank you enough for this, and for the resources you provide on your site. Thank you so much, honestly.”*