Holding Space, Creating Safety

A Toolkit for Facilitating Conversations about Sexual and Intimate Partner Violence for Bisexual Peer Support Groups

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Bisexual Resource Center:
The Bisexual Resource Center works to connect the bi+ community and help its members thrive through resources, support, and celebration. We envision an empowered, visible, and inclusive global community for bi+ people. The BRC uses “bisexual” and “bi+” as umbrella terms for people who recognize and honor their potential for sexual and emotional attraction to more than one gender (pansexual, fluid, omnisexual, queer, and all other free-identifiers). We celebrate and affirm the diversity of identity and expression regardless of labels.

National Coalition of Anti-Violence Programs (NCAVP):
The National Coalition of Anti-Violence Programs works to prevent, respond to, and end all forms of violence against and within LGBTQ communities. NCAVP is a national coalition of local member programs, affiliate organizations and individual affiliates who create systemic and social change. NCAVP strives to increase power, safety and resources through data analysis, policy advocacy, education and technical assistance. NCAVP is a program of the New York City Anti-Violence Project and partners with the Northwest Network of Bi, Trans, Lesbian and Gay Survivors of Abuse to run the National LGBTQ Institute on Intimate Partner Violence.

National LGBTQ Institute on IPV:
As a partnership between the National Resource Center on Domestic Violence and the National Coalition of Anti-Violence Programs, the Institute is collaborative force, uniting organizations by and for traditionally marginalized LGBTQ+ people to create systemic and social change. The Institute tackles intimate partner violence (IPV) at its roots by combating oppression, injustice, and inequity while advancing the conditions that foster wellbeing, connection, and loving, equitable relationships to create a world where all people are free from violence.
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Introduction

About the Toolkit

The Bisexual Resource Center published *Growing Bi+ Community: A Resource for Facilitators* in 2017 as a resource to help people start support groups for bi+ people in their communities, especially outside of the Boston metro area. *Growing Bi+ Community* offers comprehensive resources and information on structures for support groups and social groups, including ways to facilitate these groups and how to handle particular challenges that may arise during facilitation.

The *Holding Space, Creating Safety Toolkit* is a supplement to *Growing Bi+ Community*, specifically addressing how sexual and intimate partner violence impacts bi+ communities and how facilitators can effectively address these issues if and when they arise in group settings. This Toolkit was produced through a collaboration between the Bisexual Resource Center, the National Coalition of Anti-Violence Programs (NCAVP), and the National LGBTQ Institute on Intimate Partner Violence. This Toolkit is not intended to be exhaustive, but instead offers facilitators an initial background on different forms of violence, how trauma may be manifested in peer support groups, and ways facilitators can hold space for bi+ survivors of violence while also taking care of themselves.

The Toolkit first explores the prevalence of intimate partner violence (IPV) and sexual violence (SV) in bi+ communities and offers some explanation as to why the levels of violence are so high. Next, the Toolkit offers introductory information on IPV and SV and the myriad ways that trauma can impact survivors. Finally, the Toolkit explores different ways in which facilitators can hold space for bi+ survivors in two different types of peer support groups:

1. General peer support groups for bi+ community members, and
2. IPV/SA-specific peer support groups for bi+ survivors.

The Toolkit also offers ways for facilitators to manage their own responses that may arise and practice effective self-care, especially if the facilitators are survivors of violence themselves.
Who is the toolkit for?

This toolkit is for anyone in the bi+ community already facilitating a support group or interested in facilitating a support group who would like to learn more about how intimate partner violence and sexual violence effects the bi+ community.

The toolkit was written in a trauma-informed way, but the authors are not all licensed counselors or social workers. The authors are members of the bi+ community who have both experienced intimate partner and/or sexual violence and who have held space for survivors of these forms of violence. This toolkit, in addition to Growing Bi+ Community, represents efforts of “by and for” organizations to share information and evidence-based practice with our communities. It is written by and for members of the LGBTQ community, by and for survivors of abuse, and by and for peer facilitators who step forward to enrich their communities by creating positive, healing spaces for our communities.

We believe trauma-informed and survivor-centered peer-to peer support (including social groups and gatherings) can be transformative. Peer support can help survivors reduce feelings of isolation and shame and build healthy relationships and community. Clearly no one toolkit can anticipate all potential situations, but it is our hope that the information provided in the toolkit, alongside the information in Growing Bi+ Community will offer enough resources for facilitators to feel empowered to handle a variety of situations in a trauma-informed way.

By and For: By and For organizations are organizations and groups that provide services and resources to LGBTQ communities and are run by members of LGBTQ communities.

The Bisexual Resource Center, NCAVP and The National LGBTQ Institute on IPV are all By-and-For organizations.
I. Violence Within and Against Bi+ Communities

Prevalence

The prevalence of intimate partner violence and sexual violence in bi+ communities is exceptionally high. In 2013, the Center for Disease Control (CDC) released data from the 2010 National Intimate Partner and Sexual Violence Survey (NISVS), which included specific data on rates of violence by sexual orientation. The NISVS showed that overall, bisexual women had a significantly higher lifetime prevalence of rape and sexual violence other than rape as well as higher lifetime prevalence of intimate partner violence by any perpetrator when compared to both lesbian and heterosexual women. Given the population figures for LGBT people, these rates amount to approximately 1.5 million bisexual women who have experienced intimate partner or sexual violence. The data also showed that approximately 47.4% of bisexual men experienced sexual victimization as compared to 40.2% of gay men and 20.8% of heterosexual men and that 37.3% of bisexual men experienced intimate partner violence in their lifetime compared to 20% of gay men and 29% of heterosexual men.

Further research confirms these findings. A survey of students in Minnesota from 2007-2011 found that 47% of bisexual students, 33% of gay and lesbian students, and 17% of heterosexual students reported experiencing at least one sexual assault in their lifetime. And 12% of bisexual students, 7% of gay and lesbian students, and 3.3% of heterosexual students reported experiencing a sexual assault within the last year.

Bisexual men and women experience high rates of IPV

Who Causes Harm

According to the NISVS data, the majority of bisexual and heterosexual women survivors of rape specifically reported only male perpetrators (98.3% and 99.1% respectively) and the majority of bisexual and heterosexual women survivors of intimate partner violence reported having only male perpetrators (89.5% and 98.7% respectively). For bisexual male survivors of intimate partner violence, 78.5% of respondents reported having only female perpetrators.

A serious limitation of these data is the lack of disaggregation to show differences and/or similarities between violence against bisexual people across various racial and ethnic groups, disability, income levels and other communities often at the margins. For example, it is estimated that Black women are 2.5 times more likely to be killed at the hands of an intimate partner; and the National Institute of Justice estimates that 84% of Native women (1.5 million) will experience violence in their lifetime.

The Role of Bi+ Antagonism and Bi Erasure

Much of the intimate partner and sexual violence that is perpetrated against bisexual people is shaped and driven by both bi+ antagonism and bi erasure/bi invisibility.

Bi+ antagonism, sometimes referred to as biphobia, is defined as the aversion toward bisexuality and towards bi+ people as a social group or as individuals. Bi+ antagonism stems from stereotypes like bi+ people being hypersexual (leading bi+ people to be highly fetishized and objectified), promiscuous, and deemed untrustworthy because they will “sleep with anyone.” Abusers perpetrating intimate partner violence and sexual violence especially in a “heterosexual” presenting relationship, will often use the above stereotypes as a justification to coerce, control and police their partner. It is important to remember that bi+ antagonism is distinct from homoantagonism and trans antagonism (also referred to as homophobia and transphobia), and that bi+ antagonism can be particularly pronounced within the LGBTQ community and in LGBTQ-focused organizations.


2. *The BRC uses “bi+ antagonism” instead of “biphobia” in this brochure to limit ableist language and disassociate folks with clinical phobias with folks with bigoted antagonist viewpoints.
Research published in the *Journal of Bisexuality* in 2017 examined possible causes for the intensely high rates of sexual violence that bisexual women face. Johnson and Grove hypothesized that hyper-sexualization of bisexual women, alongside bi+ antagonistic harassment and bisexual women’s greater likelihood of substance use, may compound to increase the probability of sexual assault.

In 2018, the *Journal of Sex Research* published a study that tested participants’ assumptions about hypothetical straight, lesbian, and bisexual women and found that bisexual women were viewed as more confused, promiscuous, and neurotic than straight and lesbian women. Alon Zivony, the author of the study, theorized that “bisexual stereotypes seem to be deduced based on the idea that men and women are opposites: if one holds two opposing attractions, then it stand to reason that this person will be confused.”

Another 2018 article in the journal of *Sexual and Relationship Therapy* found that a partner’s bi-antagonism, that is, their biphobia, was the single greatest predictor of intimate partner violence against a bisexual person.

Bisexual erasure, a form of bi+ antagonism, also contributes to high levels of sexual and intimate partner violence against bi+ people. Bi+ erasure or invisibility occurs when bi+ individuals’ bisexual identities are erased or ignored. Bi+ people in a relationship with someone of a different gender identity are often assumed to be in a “straight/heterosexual” relationship. Their heterosexual partner may assume that they are heterosexual as well. When talking about the LGBTQ community, often folks will say “lesbians and gays,” leaving out bisexual people altogether. This is a common example of bi+ erasure, even within the LGBTQ community. Unfortunately, this erasure occurs even in anti-violence organizations focused on LGBTQ community, many of whom do not provide bi+ specific services or any particular outreach to bi+ people.

This is why creating bi+ support groups is so important: they create safer spaces for bi+ folks to come together, be in community, problem-solve and resource share!

*A Note on Intersectionality*

When looking at research, understanding violence in bi+ communities, and planning/facilitating the support groups, it is imperative to use an intersectional lens to understand the differences between how different groups of bi+ folks experience violence, discrimination,
oppression, power and privilege. “Intersectionality,” rooted in the Black feminist movement and coined as a phrase by legal scholar Kimberlé Crenshaw in 1990, provides a way to look at how overlapping systems of oppression and discrimination operate to maintain social control by the dominant group, particularly in respect to people who occupy identities that are at the margins. Systems of oppression, such as heteropatriarchy, sexism, racism, ableism, homoantagonism, bi+ antagonism, trans antagonism, and white supremacy affect how different groups experience and respond to intimate partner and sexual violence, and how different groups of bi+ individuals understand and experience their own bi+ identities. It is not enough to assume that because everyone in your support group identifies as bi+ means that they all experience bi+ antagonism and bi erasure in the same way.

Facilitating Through Microaggressions

Building and practicing an intersectional framework includes being able to facilitate through microaggressions. Microaggressions are brief behavioral, verbal, and situational actions, comments, or gestures that are degrading, ignorant, or insulting, and can manifest both intentionally and unintentionally. In support groups, microaggressions may or may not be related to someone’s sexuality, gender identity, race/ethnicity, age, language etc. If someone identifies a microaggression against them in the group, it is important to validate that person’s experience. If you are the one who commits a microaggression, do not expect, require, or demand that the other

Resource Tip!
Check out Beyond Inclusion, Beyond Empowerment: A Developmental Strategy to Liberate Everyone by Leticia Nieto to delve deeper into understanding your own intersectional positioning.

It is equally imperative to understand how, as a facilitator, your own identities and experiences are situated within different systems of power, privilege and oppression, remembering that privilege and oppression do not negate each other, but often overlap and influence each other. For example, a Black cisgender queer disabled woman who has a master’s degree, speaks English and is a U.S. citizen experiences multiple forms of oppression due to systematic white supremacy, anti-Black racism, ableism, heteropatriarchy, etc., and may also experience instances of privilege in spaces where being an “educated” U.S citizen is valued. Asking yourself questions and understanding how your actions, assumptions, and biases can manifest oppression -- such as asking folks to sit on the floor without knowing if this is accessible for everyone, or assuming that everyone in your group has access to transportation -- is a vital part of group facilitation.
person explain or teach you why what you said/did was a microaggression. Do seek to learn on your own and commit to not repeating the action. Remember that we are all on a journey of anti-oppression and that people make mistakes! Often the best apology is a change in behavior.

Support groups offer an environment in which people can work towards healthy, conscious ways of challenging how we have been socialized to enforce, accept, and participate in systems of oppression. Because we are all impacted by the dominant culture, it is very likely that both group members and facilitators will make mistakes and enact some form of systemic oppression, display ignorance, or insult someone with words or body language sometime. Support groups offer a challenge and opportunity to work together to create ways to acknowledge these moments— for those who have harmed others to learn how to listen, recognize, and validate the harm they caused and take responsibility for doing better in the future. For those who have been targets of microaggressions, groups offer an opportunity to name the problem, request acknowledgment, and be validated in their experiences.

Resource Tip!

Check out “So you want to talk about race” by Ijeoma Oluo for great tips and frames for having conversations about race, including how to handle microaggressions.
Introduction to Sexual Violence

“Sexual violence” is an all-encompassing term used to describe a range of behaviors, actions and situations in which one person forces, manipulates, or coerces another into unwanted sexual activity without consent. Sexual violence also encompasses non-consensual sexualization and objectification of a person and treating someone as a sexual object. Sexual violence includes a spectrum of behaviors, ranging from sexual harassment and unwanted comments about someone’s body to fondling, molestation, sexual assault and rape. It is important to know that sexual violence is not about sex, but, like intimate partner violence, is about the abuser gaining or maintaining power and control over the survivor, using sex as a tool for manipulation and humiliation.

Some Types of Sexual Violence

- Rape (including attempted rape)
- Being made to penetrate someone without your consent
- Sexual coercion
- Non-contact unwanted sexual experiences (watching someone masturbate/being forced to masturbate in front of someone else, being forced to watch sexual/graphic content such as porn etc.)
- Someone making sexualized jokes about your body
- Child sexual abuse
- Sexualized cyberbullying (receiving unwanted sexual pictures, so called “revenge porn” when someone shows/sends nude pictures to others without the original person’s consent)
- Sexualized verbal harassment/ street harassment
- Unwanted sexual contact

II. Understanding Sexual Violence, Intimate Partner Violence and Trauma

Victim or Survivor?

Advocates in the anti-violence movement are intentional about shifting away from criminal legal language towards more humanizing language. This includes shifting away from the criminal legal term of “victim” - a person who a crime was committed against, to the advocacy-based term of “survivor” - a person who is experiencing or has experienced violence and abuse.

Throughout this guide we will use the word survivor. However, each person’s experiences are different, and it is important for each person to self-determine the words they use to describe themselves and their experiences. When working directly with survivors/victims, always mirror the language that they use.
Consent vs. Coercion: What’s the difference?

All sexual activity should be consensual, meaning all partners want to participate in all the activities, and each partner has the option to say no to any activity at any point without fear of repercussion. Ensuring that sexual activity is truly consensual requires communication and careful attention to yourself and others involved.

Consent is all about establishing boundaries and checking in when you aren’t sure of someone else’s boundaries.

Consent must be

- Freely given, without pressure or manipulation: if no is not a safe option, yes does not equal consent;
- Reversible: anyone at any time can change their mind for any reason;
- Informed: for example, a person who says yes to sex on the condition that their partner uses a condom has been violated if that partner secretly removes the condom during sex;
- Specific: saying yes to one thing does not mean saying yes to everything;
- Enthusiastic: real consent is not the result of badgering, being worn down, or submitting to expectations.

Consent can be conveyed verbally and non-verbally (sighs, smiles, active participation). Likewise, lack of consent may also be conveyed non-verbally - stiffness, silence, pulling away, crying, showing fear all indicate a lack of consent.

Practice Tip

Victim-blaming in a support group setting should be interrupted and thoughtfully examined. Placing the urge to blame the victim in context of the rape culture and noting how it benefits those who perpetrate sexual assault while harming survivors can be helpful in redirecting conversation. Survivors may have taken on these messages and blame themselves. Gentle and persistent challenging of victim blaming while affirming the survivor’s right to exist free from violence can be helpful.

Sometimes survivors feel confused about a sexually violent experience, because all the elements of consent weren’t present, but they verbally said “Yes.” For example, if someone’s partner kept asking them for sex, and the survivor finally gave in after two nights of being pressured and badgered, that is sexual coercion. Saying “Yes” simply to bring an end to the badgering for
sex may be a survival tactic, but it is not meaningful consent. “Yes” has no meaning when saying no has serious costs or consequences. For example, if a survivor knows that by saying no or resisting they would be putting themselves in more danger, saying “Yes” does not indicate consent.

Sexual coercion is a tactic that a perpetrator uses to force someone to submit to a sexual activity without using physical force. Sexual coercion can come in the form of breaking someone down as in the above example, using threats (“if you don’t have sex with me I will hurt someone you love/hurt myself,” or “if you don’t have sex with me I’ll leave you”), threatening to “out” the survivor (“if you don’t have sex with me I’ll tell everyone you’re bisexual”) and any other tactic to assert power and control over the survivor to get them to have sex in a non-physically forcible way. Sexual coercion can also occur through a perpetrator giving someone drugs or intentionally getting someone intoxicated so that they can have sex. Sexual coercion can be especially tricky for survivors to navigate because these tactics don’t fit into the normative “forcible rape” narrative.

**Myths About Sexual Violence**

*Only cisgender women can be raped (and a rapist is always a cisgender man).*

**Facilitation Tip**

Never assume someone’s sexual and/or gender identity based on the identity of the person who harmed them.

**People of any sexual orientation or gender identity may engage in or experience sexual violence.** Sexual violence, including rape, can occur between people of the same gender identity. People in a same-gender relationship who experience rape or assault by someone of the same gender may find their experience trivialized or minimized by others because their experience doesn’t fit the common images of rape. Likewise, those who identify as male who are raped or assaulted by a woman may find their experiences dismissed for similar reasons. While a majority of bi+ women experience violence perpetrated against them by men, a large portion of bi+ men report violence perpetrated against them by women.
Sexual violence can be prevented by wearing conservative clothes, going home early, and staying sober.

**Facilitation Tip**

You cannot assume someone is a survivor or a person who does harm based on their gender and/or the gender of their partner.

Everyone has the right to exist freely without the threat of sexual violence. Sexual violence is never the survivor’s fault. Factors such as what the survivor was wearing, drinking/consuming, what time of day it was, etc. have no bearing on why the assault occurred. The violence occurred because the abuser made a choice to enact sexual violence. Statements that place blame on the survivor such as “Well what were you doing in that part of town so late?” or “Why did you have so much to drink?” or “You know that skirt showed way too much of your body” are victim blaming statements. Victim blaming shifts blame and scrutiny onto the survivor’s actions and behavior and away from the actions of the perpetrator.

If they don’t report the violence to law enforcement/school/work, it must not have really happened.

The choice to report or disclose sexual violence is a deeply personal one in which the survivor often has to factor in a multitude of considerations.

Across all racial, ethnic, sexual and gender identity groups, rape is the most underreported crime in the United States. Many factors shape this. For example, Black survivors may feel particularly conflicted about reporting their abuser or perpetrator to law enforcement if their perpetrator is also Black due to systematic anti-Black racism embedded in our criminal legal system. Due to the over-criminalization and policing of Black people and Black communities, Black survivors may be fueled by the desire to keep more Black people from being incarcerated. Additionally, the criminal legal system is one of the largest state sanctioned perpetrators of sexual violence, which complicates the notion that the criminal legal system can effectively provide recourse for a survivor of sexual violence.
For many people, there is shame and stigma attached to being a survivor, and having to navigate large legal, education, or economic systems and having to “come out” as a survivor to those systems is a daunting task. Survivors may be scared that they will lose their job, that they will face retaliation at school from the abuser or their friends, or that the criminal legal system will end up targeting them for other aspects of their identity (such as being undocumented, a sex worker, a trans person of color etc.) The reality is that reporting isn’t as simple as some might think, and a survivor has a lot of complex decisions to make regarding reporting. None of this negates that the violence happened.

Facilitation Tip

If the topic of reporting comes up in the group, be respectful of the survivor’s choice and reasons for choosing to report or not. If someone is seeking support about whether they want to report to the police, it can be helpful to ask them questions, such as

- What do they hope to gain by reporting?
- How good a support system do they feel like they have to help them through the process?
- What do they need to feel safe?

Facilitation Tip

Never make the decision for them or make the survivor feel that you are forcing them into a decision. Offer referrals to organizations in your area that work with LGBTQ survivors and who can offer legal advice and help. Always focus on giving the survivor options, space, and support to make their own choices. It may be helpful to ask others in the group if they have been in this position before, and what considerations they made around reporting, again remembering that they aren’t offering judgement but rather discussing how they navigated this complex choice.

Sexual violence is only perpetrated by strangers.

This is not the case. According to statistics, 7 out of 10 rapes are perpetrated by someone that the survivor is in a relationship with (intimate partner rape) or knows (sometimes called acquaintance or date rape). It is much more likely for sexual violence, especially rape, to be perpetrated by someone known to the survivor.

“7 out of 10 rapes are perpetrated by someone that the survivor is in a relationship with ...or knows...”

If you had a physical response, it must not have been rape/assault/violence.

This can come up especially when talking with survivors of child sexual abuse, but it can happen for people assaulted as adults as well. It can be confusing for a survivor to have had a pleasurable physical response during a traumatic and violent experience. Some survivors may feel a great deal of shame about such a response, may worry they are the only person who has had this happen, or may question if they were “really” assaulted.

**Facilitation Tip**

Affirming for survivors that their bodies were responding to physical sensations, not to the violence itself, can be helpful. It can be a relief for survivors to hear that a physical, uncontrollable response can occur even in the context of a coercive and violent assault; a response of pleasure does not negate that coercion, or make it okay.

- “If you said yes because they had asked you repeatedly and you were worn down, that doesn’t make it ok.”
- “It is normal to be feeling a range of emotions related to your experience, even if it happened many years ago. It’s also perfectly normal to feel numb.”
- “You have not only the ability but also the right to heal from sexual violence and to thrive in your life.”

**Ways to affirm bi+ survivors of sexual violence**

- “What happened was not your fault.”
- “Thank you for trusting the group enough to share your story. We all believe you and are here to support you.”
- “Nothing that you said or did caused this to happen, the perpetrator made a choice to act in this way.”

**Facilitation Tip**

It is important that if any of the group participants express doubt about their stories, the facilitator should validate their experiences and point out ways that their perpetrator used coercion instead of getting actual, affirmative, consent and remind the group that the use of coercion is sexual violence.
Introduction to Intimate Partner Violence

It is a myth that IPV only occurs in heterosexual/straight relationships. Intimate partner violence can occur in any intimate relationship between partners of the same or different gender identities. NCAVP defines intimate partner violence (IPV) as:

“a pattern of behavior where one intimate partner coerces, dominates, or isolates another intimate partner to maintain power and control over the partner and the relationship.”

IPV may be perpetrated in many different ways, including psychological/emotional abuse, economic abuse, physical abuse, verbal abuse, sexual abuse, cultural abuse, isolation, and intimidation. While tactics vary, it is important to remember that intimate partner violence occurs 24/7, with the intent of isolating the survivor in all aspects of life. IPV within LGBTQ and HIV affected communities is particularly debilitating to the psychosocial, financial, and physical wellbeing of survivors because of the various levels of discrimination and harassment that members of these communities face in other areas of their lives. It’s important to remember that what makes a behavior abusive is its role in assisting one person to maintain control and power over another in a relationship, with the intent of limiting or denying the agency and ability of their partner to make decisions about their own lives.

Abusers in relationships with bi+ survivors may mobilize bi+ antagonism as part of their tactics of abuse.

Some tactics that can be used to establish and continue a pattern of power and control especially against bi+ survivors:

- Threatening to out the survivor as being bi+ if they leave;
- Refusing to let the bi+ survivor spend time with the survivor’s friends of a particular gender, using fear that they will sleep around as justification for asserting control.

- It is important to remember that bi+ antagonism can play out in all types of relationships, not just presumed heterosexual relationships. For example, a bi+ antagonistic lesbian can use the fear that their girlfriend will sleep with male friends as a controlling tactic.
• Refusing to let the bi+ survivor access supportive spaces, such as bi+ social groups;
• Coercing the survivor to have sex to prove that they aren’t really bi+;
• Coercing the survivor to have sex with others, or to engage in group sex;
• Calling the survivor derogatory names based on their sexuality;
• Policing and/or calling into question gender expression;
• Stalking the survivor (physically and cyber stalking);
• Asserting financial control (such as allowances etc.) to limit the survivors’ access to material security;
• Threatening to tell a judge that the survivor is an unfit parent due to the survivor’s bi+ identity if the survivor decides to leave and ask for custody of their children; and
• Sexual violence.

The survivor/abuser dynamic cannot be identified solely based on a snapshot of time, or a single incident, but rather should be assessed on the context, intent and effect of a pattern of behaviors over time. People who are abusive establish and maintain control by employing a range of tactics and behaviors. Tactics like those listed above can be a combination of emotional, verbal, psychological, and physical. They also rely on systems of inequality to reinforce their control.

It is also important to remember that survivors may use any array of tactics and behaviors to resist this abuse and attempt to take back legitimate power over their own life. As a batterer’s abusive control escalates, resistant responses by survivors may become more intense as well.

A Note on Assessment

Service providers tend to do extensive assessment in IPV situations to accurately identify the survivor and the abuser, and to connect both to the appropriate supportive services.

As a peer support group facilitator, you may not have the expertise to conduct an assessment, but there are ways to do a pre-screening to help ensure that abusers are not accessing the support group. (For more info see Screening and Assessment on pg. 22)

Survivors use a variety of ways to resist violence and control, and it is important to affirm ways that survivors have protected themselves and established agency in an abusive situation.

Support groups can provide a space for people to examine their behaviors and
experiences in relationships and decide if those behaviors line up with their values. It isn’t necessary to label a relationship abusive in order to decide it isn’t healthy or aligned with the way someone wants to live.

As with reporting sexual violence, a survivor’s choice to report their partner or to leave the relationship is an incredibly personal and complex one. Studies show that the highest point of lethality in an IPV situation is when the survivor decides to leave.

There are many reasons a survivor might choose to stay in the relationship, and it is not appropriate for others to judge or belittle them for their decision. For example, if the bi+ survivor is an undocumented immigrant, they may be wary both of involving the criminal legal system and leaving their partner because their partner provides housing and financial security. Children may be involved. It’s also important to remember that the abuser is human too and the complexities of human relationships such as love, care, attachment and emotional bonding are still all at play.

**Facilitation Tip**

If a participant is discussing potentially leaving their partner, offer to be their sounding board for them to safety plan and offer resources but do not make the decision for them or tell them what to do. It can be helpful again to ask other participants how they’ve safety planned for themselves in these situations or others and what has been the most helpful for them to think about. Always prioritize a survivor’s self-determination in the process, affirming that the survivor knows what they need.

If someone is staying with their abusive partner or returns to their abusive partner, it is important to not pass judgement on that person’s decision and to be vigilant for victim-blaming that may appear in group such as, “Why did you go back?” or “Why are you staying with them?”
Ways to affirm IPV survivors if they want support around making decisions to report and/or leave:

- “You are the expert in your experience and the fact that you were able to make that choice (to stay/leave) for yourself is a big deal. How can we support you staying safe in that choice?”
- “What has been hard for you thinking about (staying/leaving/reporting) that we could support you talking through?”
- “We are all here to listen to you and be a sounding board. We can’t make any decisions for you but we trust that you can and will make the best decision for yourself.”
- “What is your vision or what do you hope to gain in the next few years? How would (leaving, staying, reporting etc.) help you get there?”
- “Is it ok if some other folks share their experiences with thinking through this choice to see what helped them or what was a stuck point for them? They may be able to give you some ideas and perspectives on your situation.”

A Note About Hate Violence:

Hate violence is enacted in many different ways, including physical violence, verbal harassment, sexual violence, and discrimination, and is distinct from other forms of violence in that it specifically targets people for their real or perceived identities.

NCAVP research on LGBTQ and HIV-affected hate violence, similar to other research on the impacts of discrimination and harassment, show that bias-motivated violence has serious psychosocial, financial, physical, safety, and other consequences for survivors. While not the focus of this guide, it can be good to keep in mind that when discussing traumatic experiences or different experiences of violence, participants may disclose that they have been a victim, known a survivor or seen an instance of hate violence. It is important to validate these experiences just as one would validate an experience of intimate partner violence or sexual violence and to know that similar expressions of trauma may arise within the group.
III. Handling Trauma in Support Groups

Sexual violence, intimate partner violence, and hate violence all can be incredibly traumatic experiences for those who survive them and can have lasting effects for survivors and communities as a whole.

Studies show that there are at least 150 physical, psychological, and mental consequences and responses to sexual violence and intimate partner violence that someone can experience.

When any one of us experiences trauma, our bodies have an instinctual chemical, physiological, survival system response: fight, flight, freeze, or fawn. Our bodily systems rush adrenaline to our organs preparing us to either fight the threat coming at us, flee the scene, or freeze until the violence passes. Often trauma responses develop when survivors are unable to fight or flee, such as during instances of sexual violence and intimate partner violence. Additionally, many survivors who have experienced repeated traumatic events, such as prolonged child sexual abuse, and intimate partner violence, may experience fawning as a trauma response. Fawning occurs when the survivor becomes so accommodating and in tune to others demands and needs that they are unable to create or maintain boundaries, assert themselves in a variety of situations, and feel unable to express their own needs and desires.

Sometimes something in the environment such as a smell, taste, sight, sound or the way someone is touched will trigger a survivor. A trigger is something that reminds the survivor of the traumatic event. A trigger acts differently for everyone. For someone a trigger might increase their heart rate and send them into a state of panic. For someone else, a strong trigger may cause a flashback or reenactment of the traumatic event itself. During a flashback, the survivor is reliving the trauma and is unable to process the fact that they are safe in the present moment and not in harm’s way. It is normal for survivors to try to avoid triggers, but sometimes triggers are unavoidable. If

Facilitation Tip

Often saying “content warning” or “trigger warning” and a very broad idea of the topic is enough. For example: “content warning, self-harm.” Always pause and allow for the group to consent to engage in the conversation or choose to leave if necessary.
you are going to be talking in group about a particularly intense topic (such as folks sharing their stories or reading potentially intense material) it is always good to give participants a heads up that this may be triggering for them, so they can prepare mentally ahead of time if necessary.

As a coping mechanism to get through a traumatic event, a survivor may disassociate, or essentially leave and mentally/emotionally disconnect from their body. Triggers of the event may also lead someone to disassociate. Some survivors may become depressed or anxious (or have existing depression or anxiety challenges worsen), develop PTSD (Post traumatic stress disorder), or develop disordered eating or sleeping patterns.

Emotional responses can include numbness and shock, guilt, anger, sadness, fear, shame, feelings of disgust for oneself and one’s body and self-blame. Physically, depending on the extent of the violence, survivors may suffer from broken bones, unwanted or lost pregnancies, high blood pressure, exposure to sexually transmitted infections, damage to reproductive organs and loss of fertility. Economically, SV and IPV can cause a survivor to lose their job or become financially unstable due to having to miss work or school for medical appointments, court appointments or struggles with maintaining mental health.

Because the very nature of intimate partner and sexual violence is to disrupt a survivor’s sense of belonging to oneself and belonging to their community, a lasting effect of trauma is isolation, disconnection, and shame. Whether a support group is survivor-focused or not, having space for a survivor to reconnect with their community, and to be validated through reconnecting with themselves in small ways, even if it is the act of going to the group itself, is powerful and is resistance. Survivors are not “broken,” “unfixable,” “damaged,” or “bad.” Each survivor is on their own journey of healing and thriving and when survivors come together the result can be transformative.

Ways trauma might show up in the space

If facilitating a general discussion and someone discloses a traumatic experience, it is important to thank the person for sharing their experience with the group and trusting the group and acknowledge that it probably wasn’t an easy thing to do.

Always validate the survivor’s experience. Feelings of shame, minimization or guilt may manifest in phrases like:

- “It wasn’t/isn’t that bad.”
- “I don’t know why I’m feeling so angry.”
• “I shouldn’t have come out.”
• “I should’ve just kept my mouth shut.”

Let the survivor know that it is normal and 100% okay to feel a range of emotions while thinking about and talking about their experiences of violence. Explaining that it sounds like they are expressing feelings of shame or guilt or that they are attempting to minimize the situation or experience can be useful. Express to the survivor that the violence that was perpetrated against them was not their fault and that whatever they said or did, did not cause the violence; it was the choice of the abuser to use violence against them. This can be a good time to allow other survivors to validate them as well and it could be useful to ask other participants if they’ve ever felt that way and if so, how do they challenge those thoughts when they come up.

**Psychoeducation** is a process of providing education and information about a mental health condition or, in this case, for trauma in order to normalize what a survivor is feeling or thinking.

**Psychoeducation** can be helpful to all participants and can help to increase and normalize an understanding of trauma responses like PTSD, increase an understanding of what IPV and sexual violence is and provide language for some experiences and emotions. This doesn’t have to be done in the context of group, this can also be done through providing resources.

It is also extremely important to not judge and to ensure that other group members don’t judge the choices and decisions of the survivor to stay or leave their abuser and equally important it is imperative to not judge the survivor’s choice to involve law enforcement or not.

Make time for explorations of joy and healing. While it is often helpful and important for people to share stories about their trauma, it is also helpful for survivors to spend time talking about what made them feel joyful or at peace in the last 24 hours, even if it was only a singular moment, or to celebrate important milestones (and even smaller milestones).
This can help connect survivors together and build community outside of the facilitated support group.

**Flashbacks**

As discussed above, flashbacks may occur for a survivor when they are triggered. If someone is triggered in group, there are techniques called “grounding techniques” that you can do with the group or the survivor individually to try and ground or remind the survivor to stay in the present moment.

- Name the experience as a flashback and a memory. Explicitly remind the survivor that they are not currently being attacked/abused/assaulted.
- Remind them that the flashback will pass and that you and the group are here with them.
- Offer physical touch (*Always ask for explicit consent before touching*).
  - Can I hold your hand?
  - Can I give you a hug?
- For some people physical touch helps ground them and return them to the present.
- Try and bring their awareness back to their body by asking them to rub their hands together really fast, wiggle their toes, focus on their breathing etc.
- Use the 5,4,3,2,1 technique to bring awareness back to the present room.
  - Ask the survivor to name 5 things they can see in the room and describe them in detail
  - Ask the survivor to name 4 things they can feel (aka themselves sitting in the chair, their sweater against their arm, air conditioning, etc.) and describe in detail
  - Ask the survivor to name 3 things they can hear
  - Ask the survivor to name 2 things they can smell
  - Ask the survivor to name 1 thing they can taste (you can also give them a mint/gum/chocolate/candy/fruit and have them describe the taste)
- Sometimes scents and essential oils such as lavender or peppermint can be grounding for a person (as always ask before offering this as a technique to ensure accessibility).
• Placing a small but heavy stone or object in someone’s hands can help physically ground someone.

• Encourage the survivor to open their eyes if their eyes are closed.

• You can always ask what they need in the moment. Depending on the severity of the flashback and the survivor, they may be able to name something they know will help. However, this is not always the case.

Flashbacks are often physically, mentally and emotionally exhausting for survivors and can leave them feeling drained. Once a survivor is feeling more grounded, it’s always good to offer water, and to ask if the survivor wants to remain in the space, take some time to step outside and sit by themselves, or to leave completely. Regardless of their decision to stay or go, follow up with the survivor afterwards, and offer resources and to continue debriefing the experience depending on your capacity. Having a flashback in a public setting like group can also bring up feelings of shame and embarrassment for the survivor. It’s important to name that flashbacks are a part of the healing process and that as a group of survivors we are here to support each other in our healing and work through our trauma and the multiple ways it shows up. As with crying, it can be incredibly powerful for a survivor to be supported and held during a flashback instead of rejected or dismissed.

Flashbacks can be scary and triggering to witness as well for participants and facilitators. However, often survivors who have experienced flashbacks are also able to help other survivors depending on their own capacity. Offer space and time to allow participants to discuss thoughts or feelings that came up for them, either together in group or afterwards individually. It may also be a time for participants to discuss how they handle flashbacks and what their coping mechanisms are or to develop some concrete skills that they may not have at the time.

Crying

Crying is a normal response when talking about our own personal experiences of violence and/or listening to others talk about their experiences. If the bi+ survivor starts crying, allow them space
to feel the emotions that are coming up, validating their experience. You can say “it can be really hard to talk about this, and a lot can come up, take your time.” Often survivors who cry in group may apologize profusely and feel embarrassed or guilty for taking up “too much time.” It’s important to reassure them that the group is here for them and that there is nothing to apologize for. As stated before, one of the most debilitating ways sexual violence or intimate partner violence enacts harm and trauma is to make the survivor feel isolated, cut off from both their communities and themselves. Bi+-erasure intersects to add to this invisibility. It can be incredibly healing for a bi+ survivor to be given a safer space to be seen and held instead of rejected. Always follow up with a bi+ survivor afterward or during a break.

Sometimes others in the group will have strong emotional reactions to what another survivor is sharing. This is okay too. However, as facilitator ensure that the others strong reactions are not taking away from the time the survivor is using to share. When the survivor is through speaking you can ask if anyone would like to share their reactions or thoughts. As a facilitator also make sure that the survivor doesn’t feel as though they have to take care of anyone else in a way that diminishes their experiences or feelings. Often it is helpful to pause and take a collective deep breath or to do a short grounding exercise in order to reset the room after someone has shared something potentially triggering or that brought about a lot of emotions.

Discussions of self-harm/self-injury and suicide

Because self-harm/self-injury is a coping mechanism that is found to be prevalent in survivors of traumatic experiences, it is important to have a little understanding if it comes up with in the group. Self-harm is usually not done with suicidal intent and is done for a variety of reasons. Some include:

- Reducing stress and tension;
- Expressing and/or releasing distress;
- Releasing anger and/or other strong emotions;
- Reducing internal numbness by causing physical pain;
- As a self-inflicted punishment for the abuse; and
- As a way to regain a sense of control over the body.

This is by no means an exhaustive list, and often people’s reasons vary and change over time. If the topic of self-harm comes up in group, it is important to not judge
the behaviors. It may be good to ask the group how they feel talking about this topic, and whether it would be useful to talk as a group on ways folks have dealt with self-harm in the past and how folks have stopped or reduced the injury they’ve caused to themselves. Facilitators should also realize this conversation may be triggering and it is important to read the room and check in to make sure that the safety of the group is being maintained. If someone expresses the desire to harm themselves then or shortly after group, try making a safety plan with the group, and provide resources and check in with the member afterwards.

As discussed in *Growing Bi+ Community*, hopefully a facilitator will not have to provide assistance to a suicidal participant, however, it is important to be prepared just in case. *Growing Bi+ Community* provides useful tips on how to handle this situation. Additionally, before calling 911, unless the survivor gives their consent, try to exhaust all other options. It may be worth looking into community-based responses to mental health crises in your area or to brainstorm with the group alternative ways to care for someone who is suicidal.

**Safety Planning for Mental Health**

As in all cases of safety planning, planning around mental health should be survivor centered and self-determined by the survivor themselves, reflective of their needs and desires.

Safety planning for mental health can include thinking through ways to delay harm (distracting activities, hiding or otherwise making the tool of self-harm inaccessible), identifying people or hotlines that someone feels comfortable reaching out to, and ways to care for themselves post harm (ex: wound care).

**On Calling 911**

While it may seem counter-intuitive, calling 911 may not automatically be the safest option for someone in crisis. In many cities/states, police often accompany ambulances, which can lead to criminalization of the survivor, especially if the survivor is Black, POC, LGBTQ, undocumented, disabled etc. Involuntary hospitalization is often also a traumatic experience for survivors and can lead to increased surveillance and criminalization once survivors are released. As always try to ensure all decisions are driven by the survivor when possible and if you have to decide keep in mind the positionality of the survivor to reduce and mitigate potential harm.
I. Choosing a Group Format

As discussed in *Growing Bi+ Community*, there are several different formats to choose from when thinking about creating a group. Groups may be survivor specific, for example a bi+ survivor peer support group. These groups can provide opportunities for survivors to be connected to other survivors who identify as bi+, to gain resources and language to talk about their experiences, and to provide a safer space for survivors outside of a formalized “counseling” group to share their experiences of healing particularly as a bi+ person.

Social and community groups can also be survivor-specific, with the purpose of bringing together survivors to engage in a space of social interaction, more focused on building community and sharing moments of joy and celebration and less focused on the experiences of violence themselves (although these may come up).

The benefits of having a survivor-specific bi+ group are many. As previously discussed, trauma is often isolating and fractures a survivor’s sense of self and community. Being able to gather with other survivors who share their sexual identity can be a very healing experience for a survivor.

<table>
<thead>
<tr>
<th>Bi+ Survivor-Specific Peer Support Group</th>
<th>Bi+ Peer Support Group</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
<td><strong>Goal</strong></td>
</tr>
<tr>
<td>To provide a safe, mutually beneficial space for bi+ survivors of IPV/SV to explore issues or questions related to their experiences of trauma and bi+ identity. Can provide psychoeducation and community support</td>
<td>To provide a safe, mutually beneficial space to discuss questions or issues related to their sexuality and form relationships with other people who identify or think they may identify as bi+</td>
</tr>
<tr>
<td><strong>Participants</strong></td>
<td><strong>Participants</strong></td>
</tr>
<tr>
<td>Limited to folks who identify as bi+ and who identifies as a survivor of SV/IPV</td>
<td>Open to anyone who identifies as bi+. Does not have to identify as a survivor</td>
</tr>
<tr>
<td><strong>How IPV/SA info is incorporated into group</strong></td>
<td><strong>How IPV/SA info is incorporated into group</strong></td>
</tr>
<tr>
<td>Centrally into every group session</td>
<td>Specific modules or sessions dedicated to IPV/SV</td>
</tr>
<tr>
<td>Benefits</td>
<td>Bi+ Survivor-Specific Peer Support Group</td>
</tr>
<tr>
<td>----------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Can facilitate healing in community with other survivors</td>
</tr>
<tr>
<td></td>
<td>Can gain shared language and psychoeducation around trauma Can create a community that survivors can use to break isolation and create pathways for support</td>
</tr>
<tr>
<td>Challenges</td>
<td>Facilitators will need to be able to create strong container for participants</td>
</tr>
<tr>
<td></td>
<td>Facilitators would need to continually reiterate that this is not a therapy group, but a peer support group.</td>
</tr>
<tr>
<td></td>
<td>Facilitators would need to be able to connect folks to resources if needed or requested</td>
</tr>
<tr>
<td>Need for Participant Screening</td>
<td>Yes. Would need to screen for survivors who identify as IPV survivors.</td>
</tr>
<tr>
<td>Demands on Facilitator</td>
<td>Higher demands for processing secondary trauma.</td>
</tr>
<tr>
<td></td>
<td>Greater need for ongoing support for the facilitator</td>
</tr>
<tr>
<td></td>
<td>Need greater knowledge of IPV/SV</td>
</tr>
</tbody>
</table>
Peer Support verses Group Therapy

Peer support groups offer participants support based on the lived experiences of everyone in the group and are most likely facilitated by someone who has lived experience themselves as well. Peer support includes psychoeducation, connecting to resources and holding space for folks to share their thoughts and feelings about a situation or an issue in a bidirectional manner where everyone can offer and receive support (though the facilitator should ensure that other folks are able to get the support they need prior to asking for support themselves).

Group therapy is led by a licensed mental health professional and is designed to manage mental health challenges, provide therapy, and impart skills to help people cope. Group therapy is usually done in tandem with individual therapy and is usually centered around a specific diagnosis (depression, substance use, anxiety etc.). A major difference between a support group and group therapy is that group therapy is not bidirectional; there are often strong boundaries between the therapist and participants, including boundaries that prevent participants from interacting outside of group.

It is important to note that this toolkit is not intended to be used to set up group therapy.

Depending on your own identification and the needs of your community, you may wish to start a support/discussion/social group built around a common shared identity, such as a bi+ survivors of color group or even more specifically a bi+ women survivors of color, or a transgender, non-binary or gender non-conforming bi+ survivors group. These spaces allow those with shared identities gather and discuss the nuances in their experience without worrying about making others from different identities uncomfortable and without being placed in the role of having to educate. They can help create a safer, more affirming space for bi+ people with a similar identity.

Factors to Consider When Choosing a Group Format

- What is your own expertise and comfort level with discussing topics like IPV and SV?
• What are the needs and/or desires of your community? Have you facilitated a support group before and IPV/SV has come up? Have you heard from community that there needs to be space for survivors?
• Do you have the capacity to facilitate a group that is specifically for bi+ survivors?
• What support do you need?
• If you are a survivor yourself, are you in a place in your own healing that you are able to hold space for other survivors?
• Do you have capacity to screen participants in intimate partner violence situations?

**Facilitation Tip**

Unless you are screening to identify survivors/abusers, your support group may include both people who have harmed others and people who have been harmed. As a support group facilitator, if you are unsure who exactly has engaged in a pattern of coercive control, it can be helpful to focus on values and healthy relationship skills; encouraging people to evaluate whether or not their actions line up with these and then questioning why or if they want to be in relationships where their actions regularly go outside their integrity.

If you are running a general bi+ support group, you may think about having a dedicated session(s) devoted to talking about potential experiences of IPV/SV especially in a peer or discussion group format. If this will be your first support group, or if you are unsure of your capacity to facilitate a survivor specific support group, it may make sense to start with facilitating a few specific discussions during a general group. This can help you assess not only your own capacity but also the need in the community as well. Decide how many sessions you want to dedicate to the conversation, keeping in mind the emotionally charged nature of the sessions and the potential for people to want to keep talking once the conversation gets going. Ensure that participants know beforehand when these discussions will be taking place, so that they can mentally, emotionally and physically prepare and choose to participate.

II. Screening and Assessment

If you are planning on running an IPV survivor-specific group, it is essential that you screen and practice assessment when recruiting members for the group. This is important in order to ensure that abusers are not accessing the support group,
which can increase their leverage and power over the survivor that they are in a relationship with (as well as potentially be abusive to others in the group). However, assessment is not simply screening out those who cause harm for accessing the group; you should be prepared to offer a few resources in your area for those who cause harm (some LGBTQ organizations offer support groups for those who cause harm, some DV organizations also run batter intervention programs, etc.)

**Facilitation Tip**

Assessment is used to understand what services and support would be most beneficial for the person reaching out. If the person reaching out is determined to be an abuser, it is important to remember it is not that they don’t require services and support, it’s that the services and support required are around accountability, not punishment.

When doing assessments, as discussed in Part One Chapter II, a single incidence of behavior cannot tell you who is the abuser and who is the survivor. It is important to understand the context of the behavior (i.e., what was happening before and after), the intent of the behavior (was the behavior intended to stop further violence, or intimidate, etc.), and the impact or effect of that behavior (whose world is getting smaller as a result?). Advocates at DV/SV and anti-violence programs will always use various forms of assessment prior to connecting a survivor to a therapeutic support group.

As a member of the community without necessarily having a mental health or social work background running a peer support group, it still is a good idea to contact participants beforehand, to get a sense of what they want to get out of the group, what other support networks they have, answer questions, clarify that the group is a peer support group and not group therapy, etc.

**Complicating the Survivor/Abuser Dichotomy**

In any peer support group, the reality is that you may have both survivors and abusers (someone who has established power and control in a relationship over time) in your group. If someone in the group discloses that they are an abuser, it is up to you and the group to decide what process of addressing that person could look like. The group could decide collectively that as a consequence and a means of accountability, that person is no longer a part of the group. The group could
decide to hold an accountability process with that person in a different way. In this instance, it is critical to hold the needs and wants of the survivors in the group. One-on-one check ins may be beneficial to allow folks to express their concerns or feelings without group pressure. It is also worth noting that this will shift the group away from a peer support group model into an accountability process which may or may not be something you have the capacity to hold, something you should consider when formulating a response. A final consideration is that many survivors, through surviving a pattern of power and control, have been made to feel responsible for the violence they experienced and made to believe that they were the one causing harm. It is critical to be able to assess the often messy patterns of power and control in a relationship, either by a skilled facilitator working privately with the participant or by referring the participant to an organization or a provider who can conduct the assessment to more confidently understand if their disclosure reflects patterns of abuse in the relationship.

The other reality is that all of us have the capacity to cause harm and to be harmed. Due to the small nature of many LGBTQ communities, especially communities in rural areas or smaller cultural groups within the LGBTQ community, like bi+ folks, it can often be the case that yourself or someone else in the group may know someone else’s abuser or have a friendship or community bond with someone else’s abuser without knowing. It is critical to maintain confidentiality and to remind the group to maintain confidentiality. Potential discussion topics to help participants navigate their complex feelings around this could include navigating and holding relationships with people who have caused harm, different models of justice and accountability, and boundary setting.

III: Planning and Logistics

Many of the planning and logistics that are referenced in Growing Bi+ Community are similar to those tips shared below.

Supply and Setting Up the Space:

- Tissues;
- Flyers and/or brochures of upcoming events that participants may be interested in;
- Community resources of organizations that offer support to LGBTQ survivors of violence as well as “mainstream” sexual violence and domestic violence organizations;
- Mental health and substance use treatment resources;

Practice Tip

Check out TransformHarm.org, a website that has compiled numerous resources and toolkits about various accountability models and facilitating restorative justice processes.

Again, note that this may not be within the scope of your group, and it is important for everyone, including yourself, to consensually opt into a new type of group if that is what is decided.
• A noise machine if sharing a space;
• Paper and pens in case folks want to write down notes, thoughts or reflections during the group;

• Some people like to use essential oils, stones, crystals, sage, candles etc. to keep themselves and others grounded and to help alleviate anxiety in a space (Be mindful if scents make the space inaccessible for folks with sensitivities and medical conditions as well as check in with the space to ensure that candles are allowed); and,
• Blankets/pillows to make the room comfortable and cozy. Especially if facilitating a survivor specific group, it may be worthwhile to bring/ask participants to bring items that make them feel comfortable. Likewise, it may be worth letting people know that it is ok to show up in whatever makes them comfortable. Cozy clothes are encouraged!

When setting up the space, be mindful that not all participants may want to or be able to sit in chairs and/or on the floor. Provide or ensure that the space can accommodate a variety of seating options and that folks with mobility needs can easily navigate the space. Lighting can also affect survivors, and it can be good if possible to ensure there are windows in the meeting space. For some folks fluorescent lighting that is common in office spaces can cause headaches or other sensory challenges. This is an aspect of accessibility to be aware of as well. If the space has gendered bathrooms, check with the facility that you are able to post signs indicating that bathrooms are gender neutral as way to facilitate accessibility for trans and gender non-conforming participants. Arrange the space so that everyone can see each other and communicate with each other, often this is done by arranging participants in a circle. In many cultures, circles are seen as indicators of power and, community or as a delineation of sacred space, all of which can be powerful concepts especially when facilitating groups with survivors.

As in all groups, and especially survivor specific groups, make sure that the space can support the privacy and confidentiality of the participants. If the space is shared and other events or meetings are taking place in the building, think about staggering your start and end times with the other event so that folks aren’t all

Facilitation Tip:
Many objects and grounding techniques such as the use of sage and crystals have their roots in Black, Indigenous, POC cultures. It is important if you do not share those identities that you are aware and actively acknowledge that rich history and tradition.
entering or leaving at the same time and think about the wording on signs that may be posted throughout the building or out front leading people to the space. This way folks who may not be out as either as bisexual and/or as a survivor can maintain their privacy and confidentiality of both their sexual identity and survivor status.

Facilitating a survivor-specific bi+ support group

Creating a safer space for any group is an essential role of the facilitator. Setting intentions and group agreements are an important first step. Many organizations are stepping away from the language of “safe space” recognizing that because of our differences, no one space may be safe for everyone participating in it and recognizing that safety looks different for all of us. Some organizations use the term “safer space” to reflect that and some use the concept of creating a “brave space” that allows folks to step out of their comfort zones and challenge their ideas while maintaining mutual respect and accountability. Regardless of what wording you choose, it’s important to let group members participate in the laying of ground rules to increase buy in and to facilitate a sense of shared responsibility to personal and collective safety of the group. Some good ground rules to get you started are provided in the guide. A great question to ask is if folks need anything else to feel supported in the space. Another good community norm is that folks are able and encouraged to take care of themselves throughout the group, even if this means leaving the space for a period of time and returning, or leaving the space altogether.

Facilitation Tip

Some common group agreements include:
- Take space, make space
- One diva, one mic
- Assume positive intent and be accountable to negative impact
- Stories stay lessons go (maintain confidentiality)

Group agreements should be co-created and visited regularly to respond to group dynamics. A check in on how the agreements are working periodically can be implemented to assess if shifts need to be made.

There are many ways to facilitate a survivor specific group and it’s important to remember that just because the group is survivor specific doesn’t mean that the only thing you have talk about is trauma! A bi+ survivor support group is simply a space where folks who identify as survivors can come together in community. It may be useful to ask participants what it is that they hope to gain from group, what topics they want to discuss, if there is anything they want to potentially explore or learn more about. The topics introduced in Growing Bi+ Community are great starting points.
**Additional topics can include:**

- Techniques for coping with triggers
- Grounding techniques
- Managing systems of reporting/the criminal legal system
- “Coming out” as a bi+ survivor to a new partner/friend/family member/colleague
- Sex and sexuality
- Healing and reclaiming joy
- Psychoeducation on the effects of trauma
- Understanding IPV and SV
- Negotiating boundaries and consent

Remind folks that this isn’t a therapy group, but rather a way for bi+ survivors to build community and talk about their experiences of survivorship and bisexuality. Set the expectation that you are not the group’s therapist, you are holding space and creating a container for folks to be able to connect, share their thoughts, share resources and build community. Reiterate to the group that just because you are the facilitator does not make you and more or less of an expert than the participants. Each person is an expert on their own lives, and each person brings something unique to the group that the rest of the group can learn from.

As a facilitator of a survivor specific bi+ support group (or really any support group) it is ideal to have an outside support system. However, especially if you are a bi+ survivor yourself, it is natural to have wanted to start the group as a form of support for yourself as well, especially if you are in an area where no other support exists. As stated in *Growing Bi+ Community*, ensure that everyone in the group has needed space to talk before turning to the group for support yourself.

**On Disclosing if you are a Survivor Yourself:**

The choice to disclose your own survivor status is a deeply individual choice. Some facilitators may feel comfortable disclosing, and some may not. If you do choose to disclose it may be good to do so at the beginning of group, potentially when talking about why you wanted to start the support group.

For example, you could say, “As a bi+ survivor myself I wanted to create space for other survivors” or, “Reflecting on my own experiences as a bi+ survivor and knowing how many bi+ people experience violence, I thought it would be good to provide some space in our group to talk.”

Of course, again, it is always your choice to decide when you want to disclose. Do be mindful that if/when you self-disclose you are doing so in a way that is not distracting or taking space from other participants.
Effectively being able to facilitate also means being aware of how you are being impacted by the group. If you are a survivor yourself, it is important to understand your own triggers and to have support for working through what may be coming up around your own experiences. Be in tuned with your own emotions and feelings, and be present to how facilitating is impacting other areas of your life. Trauma Stewardship by Laura van Dernoot Lipsky and Connie Burk define trauma exposure response as “the transformation that takes place within us as a result of exposure to the suffering of other living beings or the planet.” (p.41) They also share 16 warning signs that someone’s trauma exposure is reaching levels that are unsustainable physically, mentally, emotionally and spiritually.

1. Feeling helpless and hopeless
2. A sense that one can never do enough
3. Hypervigilance
4. Diminished creativity
5. Inability to embrace complexity
6. Minimizing
7. Chronic exhaustion/physical ailments
8. Inability to listen/deliberate avoidance
9. Dissociative moments
10. Sense of persecution
11. Guilt
12. Fear
13. Anger and cynicism
14. Inability to empathize/numbing
15. Addictions
16. An inflated sense of importance related to one’s work

It can be helpful to have support outside of the group, someone who you can debrief with and talk to (while maintaining the confidentiality and privacy of the participants if this person is not a therapist) before you notice any of these signs and especially if any of the signs are getting particularly intense. It can be helpful to also have a co-facilitator who you can switch off with if either one of you needs to take a break.

It can be helpful to remember, for both yourself and the participants that you are
working with, that you are facilitating the group, not leading the group in therapy. Understand your role: not to “fix” or to “heal,” but to create space where people are able to share their experiences, connect, learn and, be seen and validated and held in an intentional way.

*Take trauma breaks*

We interact with trauma on a daily basis, from listening to the news, interacting with people on social media, and in everyday interactions. It can be useful for facilitators (and for participants) to be intentional about setting aside time where they aren’t planning for group or interacting with traumatic content. Watching a funny movie, listening to upbeat music, reading, staying off social media for a day (or week), and hanging out with a friend can all be great ways to unplug from the constant barrage of potentially triggering news and content.

*Make space for joy and celebration*

Even if it is simply setting aside five minutes before bed to write down or reflect on one thing that brought you joy for the day or made you smile and celebrate that. Something as seemingly small as seeing a cute dog on the street, getting your coffee made just the way you like it or smiling at a stranger can be something that brought you joy, even if for a moment. Especially as a survivor yourself, it may be difficult to remember that the fact that you made it through the day is a cause for celebration! This practice can help you become more present to the good things that are happening. An alternative or addition to this can be keeping a gratitude journal and writing down one thing that you appreciated or were grateful for, for the day.

*Cultivate a movement practice*

Depending on your body’s capacity for mobility, doing yoga, going to the gym, running, dancing around your room for five minutes, or taking your dog (or a friend’s dog) for a walk can be great ways to move your body. A movement practice can help you feel more connected to your body, especially if you are struggling with dissociative and numbing feelings.

*Don’t forget to breathe!*

Often when we are stressed, anxious, or in a trauma exposure response, we forget to breathe, and our breathing gets shallow and quick. Returning your focus to the breath is a great way to slow your heart rate, reconnect with your body and practice mindfulness. There are a variety of breathing techniques and it could also be useful to teach a few of them to the participants in the group as well. Some mindfulness and breathing exercises are described below and can be modified as needed.
• Begin by letting your eyes float closed and just notice your breathing. Is it shallow or deep? Are you breathing into your chest or your belly? Don’t try and control your breath, just bring awareness to it and notice it. Then take a deep breath in through the nose and exhale out of an open mouth. Place a hand on your belly, below your belly button. Breathe into your belly and try to fill the space, and exhale out of an open mouth with a loud sigh. Repeat this a few times. Notice where in your body you are holding tension and try and breathe into that space, sending love and light to that space, and when you exhale imagine you are exhaling all of the tension and negative energy out of your body. Place your hand on your heart and feel your heartbeat. Breathe into your chest space and thank yourself for being here and being present. Take a few more intentional breathes and let your eyes float open when you’re ready.

• Progressive muscle relaxation breathing. Close your eyes and take a few deep breaths. When you breathe in tense the muscles in your feet as hard as possible. When you breathe out release the tension. Do the same for your legs, belly, chest, arms, fingers/hands, shoulders and face.

• Practice the 4 - 7 - 8 breathing technique. Exhale completely, letting all of the air in your body out. Inhale through your nose for a count of 4. Hold your breath for a count of 7. Release your breath for a count of 8 through your mouth making a “whoosh” or “ahh” sound.


Conclusion:

While the LGBTQ community generally, and the bi+ community in particular, experiences disproportionately high rates of violence, there is often silence about our experiences due to stigma, shame, and guilt. We hope that this guide provides you with enough information to begin to help break that silence around trauma and abuse. We know that this guide cannot provide all of the answers, but it is a starting point to be able to hold space for survivors and show up for our community in critical ways.

We are here to support you! If you are looking for more resources, training, technical assistance or guidance on anything in this guide, please reach out to the LGBTQ Institute, NCAVP, Bi Resource Center, or NRCDV.