

Sexual Violence's Effects on LGBTQIA+ Survivors at the Scale of the Home

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Geography

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Certification of Approval

I certify that I have read Sexual Violence's Effects on LGBTQIA+ Survivors at the Scale of the Home by Vanessa Katherine Hardin, and that in my opinion this work meets the criteria for approving a thesis submitted in partial fulfillment of the requirement for the degree Master of Arts in Geography at San Francisco State University.

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Abstract

Researchers in the field of geography who study trauma have looked at the way trauma shapes space and place for survivors of sexual violence. The majority of the literature has neglected the experiences of LGBTQIA+ survivors. To begin to bridge this gap, this thesis presents a qualitative case study based heavily on narrative analysis that examines the lived experiences of LGBTQIA+ survivors of sexual violence and their interactions with space and place within their homes.

This study collects data from LGBTQIA+ survivors at least 18 years of age who have experienced sexual violence by using an anonymous survey via Qualtrics. The survey data was used to identify trends and experiences that participants experienced or engaged in when interacting with the space of their homes. This allowed for a greater understanding of participants' lived experiences with sexual violence at the scale of the home.

This study allows for reframing in thinking beyond the normative forms of gender and sexuality. By centering LGBTQIA+ survivors' voices, research can begin to be more inclusive and provide clarity for the diverse ways LGBTQIA+ survivors interact with their homes. Participant responses showed that LGBTQIA+ survivors engage in actions such as "queering space" and "de-queering space" after experiencing sexual violence as a way to control the environment of their home. This group of survivor experiences can help pave the way for future research to be more inclusive.

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Chapter 1: Introduction

Trauma research within geography is relatively new, and geographic study of sexual violence did not begin until the 1990s and primarily the 2000's and 2010s. Despite the research that has been put forward regarding the geotrauma of sexual violence, LGBTQIA+ survivors have frequently been left out of these discussions. This may be for a few reasons. One is that sexual violence is commonly thought of as a heteronormative experience where a cisgender man attacks a cisgender woman; in reality, it can be a lot more complex than that. A second cause for this exclusion is that sexual violence and LGBTQIA+ issues can be seen as taboo subjects that many do not know how to approach in a respectful manner that minimizes retraumatizing survivors. Another reason may be that much of the previous research done has been via one-on-one interviews and focus groups. This approach breaks the anonymity factor my survey provides and forces participants to out themselves as both LGBTQIA+ and as survivors to the researcher, which a survivor may find uncomfortable.

This study explores the lived experiences of 38 LGBTQIA+ survivors from four countries. Participants were all LGBTQIA+ survivors of sexual violence. They included individuals who identified as lesbian, queer, bisexual, pansexual, asexual, demisexual, gay, or a variation of those listed prior. When it came to gender, participants identified as trans women, transfemme individuals, trans men, transmasculine individuals, cisgender women, cisgender men, intersex individuals, and folks who fall under another gender identity, such as nonbinary, genderqueer, and genderfluid. Participants' ages ranged from 20 to 44.

I value all the experiences the survivors shared with me, and I will forever be grateful for their participation in my research. This study may not be inclusive of all aspects of the lived experience of LGBTQIA+ survivors in the space of their homes as there are many, many more LGBTQIA+ survivors out in the world than just the 38 ones who partook in my survey. However, this study provides an overview and an introduction to the specific trends and experiences LGBTQIA+ survivors experience. I hope that by introducing the stories from these brave 38 survivors, I can pave the way for future research to be conducted.

Research Direction

This research seeks to answer the question, “How do LGBTQIA+ survivors interact with their space and place at the scale of their home?” This question was spawned by my realization that there is a lack of research surrounding LGBTQIA+ survivors of trauma in geography. Throughout my study, I explore how individuals interact within the spaces and places they call home. The exploration of space, place, and trauma will be discussed in depth in the following chapter through works by authors such as Rachel Pain, Judith Herman, and Alette Willis et al. It becomes clear throughout my literature review that LGBTQIA+ survivors are often left out of geotrauma research, so I aimed to change that via my qualitative case study and contribute to improving and “queering” geographic sexual violence literature.

Positionality and Motivation

In this section I describe my positionality and motivation for undertaking this study. Detailing the personal factors of a researcher draws from the qualitative methods of allowing for reflexive writing and examination of the “researcher-subject.” Doing this will enable me to provide context on my relationship to the study.

I share several aspects of my positionality with the 38 participants who partook in my research. For participants to partake in my survey, they must have been at least 18 years of age. I am over the age of 18; I am 26. Along with this, participants needed to identify somewhere under the LGBTQIA+ umbrella. I identify as LGBTQIA+ as well, more specifically as a lesbian/queer and am nonbinary/genderqueer. For me, this means I am attracted to women regardless of their sex assigned at birth, as well as folks who fall under the nonbinary category. As I identify outside the gender binary, the pronouns I feel comfortable using are they/them/theirs. Finally, participants must have experienced some form of sexual violence. I have experienced sexual violence in the forms of sexual harassment and assault, teen dating violence, rape, abuse via technology (digital abuse), and drugging leading to gang rape. Unfortunately, it is not uncommon for survivors to experience multiple forms of sexual violence throughout their lives. This proved to be true for several of the survivors in my study, as many experienced various forms of sexual trauma multiple times or over a prolonged period(s) of time.

My motivation to conduct this study with this population of LGBTQIA+ survivors was for a few reasons. First, I was interested in researching individuals similar to myself. I felt this would allow me to learn from others who have been in similar situations while also allowing me space to reflect on my own experiences with sexual violence. Second, I have worked with sexual violence prevention non-profits in the past and have always had a passion for furthering my advocacy work and supporting survivors by uplifting their voices, whether that be through methods such as protesting and other activism, volunteering, working, or researching. Finally, sexual violence research in geography is still relatively new, and there have been deficits in the research when it comes to LGBTQIA+ survivors. I found it odd and unsettling to be so engulfed

in trauma research but never see myself represented as a queer individual. I hope that in conducting a study focusing solely on LGBTQIA+ survivors of sexual violence, I can expand the literature to see ourselves represented and bring to light some of the unique challenges and actions LGBTQIA+ survivors experience and partake in within their homes.

Chapter 2: Literature Review

Up until the late 1990s and early 2000s, the experiences of survivors of sexual violence were frequently left out of geographers' discourse on violence, trauma, and fear. In recent years, however, geographical interest in violence, fear, and trauma has grown. This research is essential to understanding both the thought processes and spatial interactions of survivors of sexual violence. In this literature review, I draw upon work by Rachel Pain and other geographers who were inspired by her work on violence, fear, and trauma and seek to understand how traumas of sexual violence work to shape space for survivors. We need to emphasize the voices of those who have been marginalized and work to gain a more accurate and complete understanding of how fear and the trauma of sexual violence work to shape space, place, and personal geographies of survivors. The theoretical frameworks discussed in this paper begin to explore how fear and the traumas of sexual violence work to shape space, place, and personal geographies of survivors.

Introduction

In this literature review, I explore the interrelationship between trauma and the occupation of space for survivors of sexual violence. Discussions of these forms of violence and trauma have been left out of geographers' discourse until recently, but the issue of sexual violence has now become more prominent in human geography, especially within studies of geopolitics and health geography. The popularity of studying these forms of violence rose in the early 2000s and has continued to grow (Coddington and Micieli-Voutsinas 2017). Feminist,

social, and political geographer Rachel Pain was one of the first to delve deep into geographic research focusing on the role that space plays in trauma and fear. Geographers who have continued to research these issues have been inspired by Pain's work, along with that of American psychiatrist Judith Herman (Willis et al. 2016). Both Pain and Herman have devoted much of their research to studying space, access to care, trauma, fear, and sexual violence. Looking at how these issues interconnect and further learning how survivors of trauma occupy space can help us, as geographers, conduct future research and work to understand how geography plays a role in survivorship, trauma, and fear. Much of the research conducted on sexual violence has excluded LGBTQIA+ survivors. I would like to understand how sexual violence affects LGBTQIA+ survivors at the scale of the home, so I seek to investigate how sexual violence works to shape space, place, and personal geographies of survivors.

Understanding and Defining Trauma, Space, and Place

Trauma can come in many forms, such as a brain injury, a fractured leg from a car accident, or the physical and psychological effects of rape; this literature review focuses on trauma due to sexual violence (sexual assault, rape, childhood sexual abuse, or intimate partner violence). Throughout this paper, I will use the umbrella terms of violence or trauma. In this context, I look to Pain, who views trauma as a disease plaguing current times and defines it as a psychological injury rather than a physical one (Pain 2020). She argues that trauma can "be understood beyond individual minds and bodies" and will not only contribute to shaping a part of a space but work to shape and become part of that place (Pain 2020).

In the articles reviewed, the authors have similar definitions of sexual assault, childhood sexual abuse, and intimate partner violence. The description of sexual assault varies by location,

so I base it on both a universal definition and how most geographers studying trauma and fear describe it: as any form of sexual contact or behavior occurring without consent from all involved parties. I want to clarify that while rape (penetration without consent) is a form of sexual assault, not all sexual assault is considered rape.

There is not yet a consistent definition of childhood sexual abuse. Some scholars consider those under the age of sixteen to be minors or children who can experience childhood sexual abuse, but others consider minors to be under eighteen. Most authors did not specify what ages they were using to define children. Despite the variation in defining the age at which childhood ends, there is agreement that a minor cannot consent to sexual activities of any form with an adult, meaning childhood sexual abuse is when a minor is forced or groomed into sexual activity with an adult. Grooming, in this case, is the act or attempt of an adult to convince a child to form a sexual relationship.

Intimate partner violence, also known as domestic violence, could be psychological, physical, or both. Some examples of intimate partner violence may include insulting your partner(s), making threats, or sexual coercion. This is typically done in an attempt to gain control over a partner (or partners) by scaring and harming them, as intimate partner violence is like an act of war, according to Pain (Pain 2015). While a majority of geographic papers published before 2015 use the term “domestic violence” rather than “intimate partner violence,” I will be using the latter as intimate partner violence is more frequently used in recent studies as it is thought to be more inclusive of relationships that fall outside of traditional marriages.

To better understand how the trauma of sexual violence and space interact, it is essential to have a firm grasp of the differences between space and place. Space is where we humans and

non-human animals go about our everyday activities, and it can be used to describe where an individual goes and what they do there (Donovan 2019). I would argue that any location, absolute or relative, can be a space. For a space to transform into a place, an individual must have some personal positive, negative, or even neutral association with that space (Donovan 2019). Though I have not seen it stated anywhere in geographic literature, I believe all places are spaces, but not all spaces are places, as not every space has an associated meaning. Spaces can be abstract ideas, but for a space to transition into a place where we conduct our interactions, the abstractedness must shift and become relevant to a person's life (Donovan 2019). Though one person may view a specific location as a space, another may view it as a place, as everyone's experiences are unique and feelings of place are subjective.

Through discussions with survivors, Pain has learned that while the experience of existing in or at a place where one has experienced trauma can be retraumatizing to some survivors, others see this as an opportunity to mobilize and begin rebuilding from the trauma, leading them to feel liberated in the long term (Pain 2020). Geographers Courtney Donovan and Ebru Ustundag observe that while some individuals face spatial challenges and barriers in achieving justice after trauma, others may feel liberated by their interactions with a space; each survivor may view justice and liberation at different scales (Donovan and Ustundag 2017). Since spaces and places constantly evolve, a person's perception may also change over time. Initially, a survivor may fear returning to the space where they experienced trauma or to a space that reminds them of the initial location, and may have trouble finding comfort in that space. However, over time, some survivors may find that returning to a site where they experienced trauma may begin to offer healing as they overcome the fear of returning (Pain 2000).

Methods

The methods primarily used in the literature I reviewed were one-on-one and small group interviews with survivors and others who were there at the time the survivors were being assaulted, such as a survivor's friends and/or family, law enforcement, counselors, and experts in fields such as sexual violence, advocacy, or psychology. The structures of these interviews varied, though all authors kept the participants in their studies anonymous. Pain, for example, conducted a lot of one-on-one interviews and discussions with survivors and refers to them as the "experts" and to those who have not experienced trauma as "amateurs" (Pain 2014a). In contrast, in "Spaces of dissociation: the impact of childhood sexual abuse on the personal geographies of adult survivors" (Willis et al. 2016), the authors conducted their research via one-on-one interviews with survivors, group interviews via a focus group, and occasional interviews and participation from these individuals' counselors.

Rachel Pain (2014, 2020) and Alette Willis et al. (2016) had notable differences in their selection of study participants. Willis et al. contacted multiple volunteers from the organization they contacted, but chose only five women for interviews; the final three participants the authors discussed in their study were all in positions of privilege compared to many survivors (Willis et al. 2016). The three stories the authors shared were from White women in their thirties, forties, and fifties who suffered childhood sexual abuse and, at the time of the interviews, were employed homeowners living with family members; none of them had ever gone missing or suffered homelessness or incarceration. In addition, they all had access to counseling, a privilege many survivors cannot afford (Willis et al. 2016). The issue with highlighting strictly these women's stories is that they are the kinds of stories emphasized in the media and represent best-

case scenarios, as many survivors do not have the privilege of having a support system, job, counseling, or even being alive. For this reason, I appreciate Pain's research methods and believe her articles are more representative of different experiences survivors may experience.

Pain works to ensure that the voices she emphasizes are diverse and display the realities and challenges many survivors face in attempting to overcome fear from trauma and occupy space. For example, in her paper "Geotrauma: Violence, place, and repossession," she regards the survivors in her research as experts and emphasizes Black, Indigenous, and queer voices to help understand trauma, fear, and survivors' interactions with space (Pain 2020). Another one of Pain's works focusing on trauma and fear is "Gendered Violence: Rotating Intimacy" (Pain 2014c), which urges geographers to diversify their work with survivors. Pain argues that limited research in geography on trauma emphasizes White, cisgender female, heterosexual, middle-class voices and portrays their experiences as if they were universal. In reality, people of color, LGBTQIA+ folks, those with lower incomes, or other disadvantages may have very different experiences as survivors. By continuing to exclude and silence the voices of Black, Brown, Indigenous, lower-income, unhoused, LGBTQIA+, and other marginalized survivors, Pain contends, we harm their communities through colonizing their stories and further perpetuating a form of trauma referred to as geotrauma.

Geotrauma and Chronic Fear

Geotrauma, a term coined by Pain, is used to describe "the ongoing clasping of [trauma] and place" and suggests that trauma can be located beyond just the mind and body, as trauma impacts space and expands into "the social, environmental, and structural contexts around us" (Pain 2020). Sexual violence is considered geotrauma; other examples could include racial and

colonial oppression, ongoing wars, or hate crimes against the LGBTQ+ community (Pain 2020). Geotrauma is a form of chronic trauma—trauma that is ongoing or prolonged over time; it is usually repeated across multiple incidents. However, geotrauma is more specific than chronic trauma in that it works to reshape spaces and contributes to the formation of places (Pain 2020). While some survivors may only experience sexual violence once, many are in situations where violent incidents occur on multiple occasions and continue to shape their perceptions and interactions with space. This is especially true for childhood sexual abuse and intimate partner violence, as survivors of these traumas are often trapped in the same space as their abusers with limited resources to escape safely.

A survivor may develop chronic fear from the geotraumas of sexual violence, which, in turn, can impact their personal geographies and create challenges in occupying space (Pain 2014a). Those who experience trauma often deal with complex symptoms during and after the violence: low self-esteem, depression, disordered eating, difficulty functioning, suicidal thoughts, cutting and other forms of self-harm, sleep disorders, anxiety, dissociation, changes in perception of themselves and their space, chronic fear, or PTSD or C-PTSD (Pain 2020; Herman 1992; Pain 2014a). Judith Herman coined the term C-PTSD, “complex post-traumatic stress disorder” to refer to symptoms associated with and diagnosed after a series of prolonged and repeated trauma(s) (Herman 1992). Her research largely contributed to the official formulation of this mental health condition. Pain has done extensive research on fear, and in particular, on chronic fear—fear that rarely or never stops, and feels like one is constantly treading on eggshells (Pain 2014a). In her paper “Seismologies of Emotion: Fear and Activism during Domestic Violence” (Pain 2014a), Pain interviewed sixteen survivors of intimate partner

violence, who altogether had been in eighteen intimate relationships that involved forms of emotional, physical, and/or sexual violence. Most of her interviewees were women, but there were two men, and at the time the abuse was taking place, thirteen of the participants had young children in their custody. Participants had varying income levels and identified with different races, ethnicities, and nationalities. Their ages ranged from twenty-five to sixty-five years old, and some had been in same-sex relationships. Despite the diversity in the participants' identities and various experiences, one thing rang true for each interviewee: the fear each survivor experienced continued to escalate each day throughout their abusive relationships and even after creating a physical distance from the abusers, meaning all of the participants in Pain's study developed chronic fear from the abuse.

Occupying and Reclaiming Space

The stress of being in a constant state of fear can cause a survivor many long-term mental and physical health issues including mental illness, suicidal thoughts, head and body aches, upset stomach, or heart palpitations (Pain 2014b; Pain 2014a). Geographers and psychologists have confirmed that along with such health impacts, fear can make trauma survivors feel they have no control over their environment or force them to seek out ways to gain some form of control over various spaces (Donovan and Ustundag 2017; Pain 2014b; Pain 2020; Pain 2009; Herman 1992, Pain 2015; Pain 2014a; Pain 1991; Willis et al. 2016). Being a survivor myself, I did not realize how often I felt I lacked control of my space, nor how much I tried to control everything when I was in the places where my trauma occurred, until I read the stories from the women in "Spaces of dissociation: the impact of childhood sexual abuse on the personal geographies of adult survivors" (Willis et al. 2016). As I previously explained, I believe Willis et al. (2016) failed to

collect stories representing a diverse group of survivors, but they nonetheless provided excellent excerpts and discussion of how survivors occupy and interact with space to show how fear and trauma may shape space and a survivor's personal geographies.

Survivors are often viewed as “controlling” or as having obsessive-compulsive disorder for the ways they try to take control of their environment, but the fear caused by the trauma of sexual violence is the reason for their attempt to control space. Despite outsiders judging the attempt to find some form of regulation over space as unhealthy, geographers, psychologists, and activists have long recognized that controlling space can allow a survivor to regain power and begin taking steps to recover from the trauma (Willis et al. 2016).

Herman (1992) delved deep into dissociation and its role in shaping how a person interacts (or fails to interact) with their environment. There are multiple ways a person may dissociate but a straightforward way to define dissociation is to separate oneself from reality to avoid feeling like a prisoner of one's mind (Herman 1992). Survivors often dissociate as a coping mechanism when the trauma is taking place, and may suffer from dissociation later as a complex symptom of the trauma (Herman 1992). Willis et al. write that “it is well recognized that children subjected to sexual abuse may learn to mentally separate themselves” to feel a sense of protection after experiencing trauma (Willis et al. 2016, 207). Through Herman's and Pain's individual works, we see similar experiences among sexual violence survivors. Pain and Willis et al. take dissociation a step further than Herman; however, by employing her definitions and research, they lead to the idea of geographic dissociation. While it is unknown precisely who developed this concept, both Pain and Willis et al. emphasize it throughout their writings. Geographic dissociation is when an individual attempts to control and create their ideal space by

separating themselves spatially and temporally from a place that holds memories they would rather not associate with (Willis et al. 2016). I predict this concept of geographic dissociation will be heavily emphasized by LGBTQIA+ survivors describing how sexual violence affects them at the scale of the home.

The majority of survivors who undergo the spatial and temporal separation of geographic dissociation use it to try to shape the spaces where they are forced to exist, to try to survive; the fear created by the trauma can cause a feeling of unease if a space is not “just right” (Pain 2014a). Allowing survivors to control their space provides them some clarity about their personal geographies, as this attempt to feel “normal” can allow them to reflect on the thoughts and feelings surrounding their fear; this geographic self-reflection is an essential part of healing and helps survivors learn to feel at ease in a space without needing constant control (Willis et al. 2016).

In multiple papers, Pain and Herman provide examples of adjustments survivors make in their space(s) to create environments that do not foster further growth of fear from previous or current traumas. These adjustments range from minor rearrangements of bedroom furniture to more extreme life changes, such as moving to another state or country. They may avoid specific spaces such as movie theaters or their parents’ house, invest in extra security (cameras, locks, automatic lights, et cetera), move furniture around, move homes entirely, leave relationships, change the people they are surrounded by or engage with, dissociate, or change identity and personality, causing a shift in the way they interact with space (Herman 1992). Pain also notes additional adaptations such as adopting hypermasculine or hyperfeminine behavior in an attempt to change the way one interacts with space, having one’s children stay with someone else or

placing them in foster care if the abuse is exceptionally severe, changing the body (e.g. weight loss or gain, haircuts, tattoos), or changing modes of transportation or transportation routes (Pain 2014c, Pain 2020; Pain 2015; Pain 1991). Pain contends that each of these actions triggered by chronic fear shifts a survivor's space at some scale, perhaps at a small scale, such as the scale of the body, or at a slightly larger scale, such as the scale of the home (Pain 1991).

Geographic Disparities

We have come so far with research in geography surrounding sexual violence, considering that research on these issues was almost nonexistent thirty years ago. However, this is not good enough. Geographic research on space, fear, or trauma still focuses on survivors who are in positions of privilege and have resources for support. This is not to understate their trauma, as nobody should have to experience the trauma of childhood sexual abuse or any form of sexual violence, but simply to observe that such survivors may feel as though they have recovered from their abuse and have a positive relationship with space because they have had access to support and the privilege (Willis et al. 2016). Few survivors have the money or resources to be able to move or to change their spaces to escape the trauma, nor to seek professional help to recover.

In the United States, Indigenous peoples have the highest rates of sexual violence based on population, yet research continues to focus on White survivors. Kate Coddington and Jacque Micieli-Voutsinas, authors of "On trauma, geography, and mobility: Towards geographies of trauma" (2017) argue that we are living in a trauma society that is dealing with "trauma culture" as occurrences of traumas, such as sexual violence, have become normalized. Trauma culture highlights stories from those whose voices are frequently heard rather than offering space for

those who have been left out of the discourse on violence (Coddington and Micieli-Voutsinas 2017).

In “Mapping the Intersections of Violence on Black Women’s Sexual Health within the Jim Crow Geographies of Cincinnati Neighborhoods” (2018), Carolette Norwood, a Professor of Sociology and Women’s, Gender, and Sexuality Studies, does an excellent job of further breaking down trauma culture and the harm it does to Black communities and other communities of color. Norwood ties physical and human geographies into her studies, stressing that researchers studying assaults need to acknowledge the trauma that Black women specifically experience during incidents of sexual violence, as their voices have been silenced for far too long (2018). Like Pain, Norwood works to ensure that participants in her studies have diverse identities, as the ways people interact with space changes drastically based on identity. She also works to bring attention to the different geographic disparities that people of color, especially Black women, face in attempting to access care after experiencing trauma such as sexual violence, as the lack of resources and support can leave survivors of color facing cataclysmic circumstances (Norwood 2018).

The majority of research conducted by social scientists on sexual violence has also concentrated on cisgender and heterosexual survivors. In “Gendered Views of Sexual Assault, Physical Violence, and Verbal Abuse” (2015), Doug Meyer mentions that sexual violence is typically viewed as a woman’s issue, but when LGBTQIA+ people are involved, it suddenly becomes a separate issue that no one wants to talk about (65). Feminist geographer Rachel Pain has done a significant amount of research surrounding sexual violence and tries to include LGBTQIA+ folks in her research; however, she acknowledges that queer-identifying individuals

face unique challenges when dealing with sexual violence that may cause them to interact with space differently than non-LGBTQIA+ individuals. She notes that evidence suggests that there are “high levels of fear [in queer] communities” compared to among those who identify as cisgender and heterosexual (Pain 2020). Pain is not alone in acknowledging that sexual violence research in geography lacks diversity. In “Spaces of dissociation: the impact of childhood sexual abuse on the personal geographies of adult survivors,” Alette Willis et al. state that most survivors in their research are “women whose voices are shared are in a relatively privileged position compared with many survivors” (Willis et al. 2016, 210).

It is necessary to broaden this research to include LGBTQIA+ survivors’ experiences, as these individuals are often left out of the discourse surrounding sexual violence. LGBTQIA+ individuals are at considerable risk for experiencing sexual violence as society both hypersexualizes and stigmatizes the LGBTQIA+ community. In its 2015 report, the National Center for Transgender Equality notes that almost 50 percent of transgender individuals will experience sexual assault at some point in their lifetime; it is likely this percentage has increased in recent years (“Sexual Assault and the LGBTQ Community”). The CDC reports that while 17 percent of straight women have been raped, 46 percent of bisexual women will be raped at some point in their life, and 44 percent of lesbians and 61 percent of bisexual women experience rape, physical violence, or stalking by an intimate partner, compared to only 35 percent of straight women (“Sexual Assault and the LGBTQ Community”). In an ideal world, no one would suffer any form of sexual violence; however, sexual violence has always plagued our society. This research fills an important gap as it will focus specifically on LGBTQIA+ survivors as these

numbers are alarming, and LGBTQIA+ individuals are often excluded from sexual violence research.

Conclusion

For far too long, survivors of sexual violence were left out of research in geography on fear, trauma, and violence. Some voices are still excluded even in recent research. We must diversify the narrative by regarding survivors as experts in their field of trauma, and emphasizing the voices of those who have been marginalized (Pain 2020; Pain 2014a). Heeding the advice of Norwood and Pain, we need to focus on Indigenous, Black, LGBTQIA+, feminist, and postcolonial analyses to better understand the unique interactions that survivors experience in spaces of trauma, as “trauma has diverse forms and impacts that should be of interest across” geography (Pain 2020; Norwood 2018). By doing this, we can gain a more accurate understanding of how fear and the traumas of sexual assault, childhood sexual abuse, and intimate partner violence work to shape space, place, and personal geographies of survivors.

Chapter 3: Methods

Introduction

In this section, I will discuss my research design, and selection of methods for data collection and analysis. I will also include a discussion of my experience as a researcher. My research allowed me to collect qualitative data that documents the relationships between LGBTQIA+ survivors of sexual violence and their homes.

I first discuss the ethical considerations I made when conducting my research. Following this, I discuss the methodology in which my study design is grounded. Next, I describe the sampling, survey, and analysis processes. Finally, I conclude this section by reflecting on the challenges I encountered in the research process.

Ethics

Throughout the process of conducting my research, I proceeded with as much care as possible to ensure the ethics of this study remained intact. Given that the population I chose to study—LGBTQIA+ survivors of sexual violence—is a vulnerable one, I decided to keep the survey anonymous and private for the comfort of my participants. Those who chose to participate were provided with complete information about the purpose and procedure of my research. Participants were also provided with resources throughout the survey, given that the topic of sexual violence can trigger psychological discomfort. These resources included supportive hotlines and websites.

To ensure the complete anonymity of the 38 participants, I assigned each participant a letter, beginning at the start of the alphabet. Then, I repeated the letter in duplicates (Participant A through Participant Z and Participant AA through Participant LL). I was also sure to maintain anonymity via my Qualtrics survey by never asking for participants' names. Qualtrics is a free online survey building tool, and I was able to use it to create the anonymous survey that I conducted. I learned how to set the questions to "anonymous" to prevent Qualtrics from returning participants' names and IP addresses. Any information I obtained was recorded in such a manner that the identity of the human subjects could not be ascertained directly or through identifiers linked to the subjects.

Methodology and Design

As a case study analyzing how experiencing sexual violence affects LGBTQIA+ survivors' interactions with and perceptions of space at the scale of the home, this thesis is grounded in queer and feminist analyses. These two can help us better understand the unique interactions that survivors experience in spaces of trauma. Combining the spatial and scale aspects of geography with queer and feminist analyses allows us to look at other elements that intersect with sexual trauma, such as age, race, sexuality and gender. I take inspiration from authors such as Rachel Pain and Judith Herman, who have paved the way for geographers studying trauma such as sexual violence.

I designed my research as a qualitative case study, as qualitative methods seemed best suited for hearing personal stories and learning from participants. Quantitative research involves numerical data and typically works to test hypotheses via statistical analysis. On the other hand, qualitative data is non-numerical and allows for understanding experiences. Working with

qualitative methods allowed me to gain more information on the context and experiences that LGBTQIA+ survivors of sexual violence went through, whereas utilizing strictly quantitative assessments would not have allowed me to collect the personal narratives I did from survivors. I chose to capture data via an in-depth anonymous survey. I analyzed the qualitative data collected using manual coding and in-depth discourse analysis. These methods allowed me to identify patterns, themes, and specific information from survey responses.

Sampling

I conducted sampling by digitally distributing a flyer to multiple websites, including Instagram, Facebook, Bluesky, X (formerly known as Twitter), Discord, TikTok, Reddit, and LinkedIn. I began the sampling process in October of 2024 by posting my flyer on Instagram. In November, I then shared it on Facebook. Following this, I began releasing it to different websites throughout the month. During this time, friends, followers, and strangers began resharing my posts so that my flyer could reach an even greater audience. In the past, I have worked with nonprofits that focus their work on sexual violence prevention, so I knew that in sharing with my social media communities, I would have a great chance of the flyer being seen by survivors of sexual violence, as many folks I have worked with follow me online. Being that I originally shared the flyer mostly with people whom I personally knew and strangers who follow me online for my activism, this may have led to a bias in compiling survey responses due to the fact that those who follow me online likely feel as though they know me and trust me in some capacity. However, those who liked, reposted, commented, or engaged in other ways with my posts on TikTok, Bluesky, and Reddit were complete strangers and not people who follow me. I believe that having individuals share my posts helped in compiling participant responses from others

outside of my immediate social media circle. Despite this, I still believe that there may have been a small bit of bias in collecting responses due to the connections between myself and those who saw the post first on Instagram and Facebook.

I closed my survey near the beginning of February 2025. To be eligible to take part in the survey, participants had to be adults aged eighteen or older who identified somewhere under the LGBTQIA+ umbrella, and they must have experienced some form of sexual violence, including but not limited to rape, intimate partner violence, childhood sexual abuse, or sexual assault. Forty individuals responded to my survey, but I eliminated two of the respondents: one individual who did not identify as part of the LGBTQIA+ community, and another who wrote the same word (“iguana”) in response to every question. This yielded a sample size of 38 respondents for my analysis.

Survey Process

My survey was conducted using the Qualtrics internet survey platform. I contacted my school's IT department to learn how to maintain complete anonymity by setting the survey to prevent returning the IP addresses. Any information I obtained was recorded in such a manner that the identity of the participants could not readily be ascertained directly or through identifiers linked to the individuals. This allowed for complete anonymity. For several reasons, I chose to use a virtual survey and keep participants anonymous to myself and everyone else. First, maintaining anonymity ensured that I would not have to report anything to the Title IX office at my school in case a participant who disclosed sexual violence was someone I recognized as a student from San Francisco State University. Thankfully, in the survey, no one disclosed any school locations. Second, participants were more likely to feel comfortable disclosing their

stories if their names were not attached to the trauma they endured. Third, in using a virtual survey format, participants could skip any questions they did not feel comfortable answering. And four, I am still very COVID-cautious and did not want to risk any chance of spreading an illness or getting sick if I expanded beyond a virtual format.

If an individual decided to participate in my survey, the flyer contained a QR code, and the text I shared with the posted flyer included a typed-out link. The first page of the survey provided information on implied consent and resources. Before proceeding to the rest of the survey, the participants had to acknowledge that they consented to participate in the study and understood that anything they submitted through the form might be used for my research.

I divided the survey into three sections: (1) demographics, (2) background about the violence experienced, and (3) a section on spatial interactions, space, place, and scale within a home. The sections contained seven, six, and nine questions, respectively (see Appendix A.) Resources were listed throughout the survey, and definitions for terms such as spatial interactions, space, place, and scale were provided. The demographic questions were used to ensure that participants were at least 18 years old, to clarify whether a participant identified as LGBTQIA+ and to provide participants the opportunity to share more about their defining identities that they feel are important. This section also allowed me to gain a better understanding of what each survivor defined "home" to be. The second section focused on the violence experienced: the age(s) in which the sexual violence occurred, the type(s) of violence survivors experienced, where the violence occurred, details about their attacker(s), and the location of the violence. Survivors only answered questions with which they were comfortable. The third section dove into a more in-depth discussion of space, place, scale, and spatial interactions,

focusing on survivors' interactions in their place of living. This section also offered survivors a space to share anything else they wanted or felt was crucial to add.

Analysis Process

Coding Methods

I opted for manual coding because it allowed me to examine the responses I received from survey participants carefully. Manual coding can be time-consuming, but I felt it was best for analyzing my results. I could identify patterns, themes, and specific information that stood out or trended amongst responses. I took this information, developed and manually assigned codes—or key terms—to categorize the data. Some of the codes I used to organize data included: geotrauma, defining home, queer, trans, relocation, queering space, and sexual violence type.

Analytic Methods

My primary analysis method was discourse analysis, which allowed me to theme my data further and discover trends across responses from survivors. More specifically, I leaned toward narrative analysis as a form of discourse analysis. Narrative analysis allowed me to explore the stories survivors shared and to use their experiences to convey identities, experiences, trends, and personal stories. This approach is especially successful when it comes to storytelling, and I wanted to ensure that survivors' stories were heard through my research. Analyzing these narratives of sexual violence allowed me and any readers to understand how survivors describe their experiences.

Challenges

During my recruiting and research process, two challenges appeared. First, given that my outreach was done via virtual methods of sharing my flyer on various websites, the most

common responses came from individuals in their 20s, the same age range as me. There were also a few responses from individuals in their 30s and 40s, though not all participants shared their age, so there is a chance that individuals of other age ranges may have taken part in my survey. Having at least 50 percent of participants in their 20s may have led to a narrowing of the knowledge I was able to compile. I believe that if I had completed more outreach with physical flyers, I would have received responses from more diverse age ranges. However, the younger generation finds the topic of sexual violence less taboo and appears to be more open to speaking about the issue.

The second challenge was more personal. Given that I am a survivor of sexual violence myself, I sometimes found the stories challenging and heartbreaking to read. I took lots of time and space between reading and analyzing responses for my own mental health. This prolonged the process of completing my thesis as quickly as I would have liked. However, this was a challenge I overcame, and I found ways to prioritize self-care while completing my research.

Conclusion

The methods I described in this section were selected to aid in completing rigorous qualitative research concerning LGBTQIA+ survivors of sexual violence and their interactions with their homes. Qualitative methods best suited my case study and would allow for proper analysis of survivor stories. Outreach was conducted by virtually distributing flyers to various social media websites, including Instagram, Facebook, Bluesky, X (formerly known as Twitter), Discord, TikTok, Reddit, and LinkedIn. I hoped to receive diverse responses by sharing on multiple websites with different audiences. This was partially successful because I received many responses from participants; however, most were in the same age range.

Participation occurred in one phase: completing the survey. Survey responses were then coded and analyzed using discourse analysis, specifically narrative analysis. These analytic methods were chosen to support my goal of collecting data based on the lived experiences of survivors.

In the following two sections, I will present and discuss the results of my qualitative analysis. This discussion will follow from the methods detailed here.

Chapter 4: Results

Who Are Our Survivors?

Throughout my research, I refer to my participants as survivors of sexual violence. In this capacity, sexual violence encapsulates many forms of violence. When publishing my survey, I listed a few examples of sexual violence, including rape, sexual assault, intimate partner violence, and childhood sexual abuse. Those who completed the survey came from many walks of life and experienced these acts of violence and more.

Not all of the 38 participants chose to disclose the types of sexual violence they experienced; however, the majority of them did opt to share. The types of violence disclosed—in ways survivors described—included rape, gang rape, sexual assault, sexual abuse, childhood sexual abuse, sexual exploitation, sexual harassment, intimate partner violence (also referred to as domestic violence), being forced to partake in child pornography, stalking leading to assault, coercive control, child-on-child sexual abuse (often referred to as COCSA), teen dating violence, abduction, being held hostage, grooming, groping, being drugged, incest, molestation, military sexual trauma, waterboarding, sex trafficking, abuse via technology (digital abuse), and sexual assault and abuse via conversion therapy. Unfortunately, many of the survivors experienced the same violence multiple times, experienced multiple forms of the violence, or both. For example, Participant J is a survivor of child-on-child sexual abuse, teen dating violence, rape, sexual harassment, and being held hostage at gunpoint. Participant J's perpetrator was the same individual and his friends throughout many years. In comparison, Participant II experienced their

father being sexually inappropriate with them in several ways as a child and later was assaulted and coerced by multiple men as a teen. These are just two of many participants who experienced sexual violence in separate ways and by different perpetrators.

I offered survivors the space to share more information about their perpetrator(s) if they wished. Out of the 38 participants, 30 survivors took this opportunity. A majority of participants personally knew their attacker(s). Perpetrators were identified as former partners, family members, friends/acquaintances, teachers, tutors, church members, fellow military members, classmates, coworkers, neighbors, housemates, apartment mates, fellow shelter residents, or strangers. While some perpetrators also identified as LGBTQIA+, the majority of survivors said they did not believe their attackers also identified as LGBTQIA+, and most were described to be heterosexual and cisgender males. Out of the 30 participants who disclosed information about their perpetrators, 23 shared that they were targeted for their LGBTQIA+ identity. Participant H, who identifies as a lesbian, shared:

"One [of my perpetrators] lived in the shelter with me (so I knew him), and one was his friend. Both were [cis] men. One was around my age and maybe Latino; the other was much older and White. I was assaulted at the older one's house. The older one was maybe 400 pounds, so he was able to hold me down while they both took turns raping me vaginally, anally, and orally. They repeatedly called me slurs and said this would cure me of my lesbianism."

Participant I was targeted for being trans and said,

"[The] first person was my friend's father[,] who died in Iran two years after the abuse began. Then it was my ex-boyfriend. He claimed not to be queer, even called me a faggot

once, but then he cheated on me with a man. And, against my wishes, would try to masculinize me. (Ie: dirty talk about me having a penis). It all felt racist. This partner was a [W]hite man."

Participant J was also targeted for their queerness and shared,

"[My perpetrator] was cishet and would often use my queerness as a reason to assault and abuse me and harass me with his friends."

Participant V lives in fear and stated,

"He is older than me and not queer or trans. He targeted me for being trans. He was released from prison, and it gives me anxiety knowing he runs free and could find me."

Participants represented a variety of demographic groups, based on the information they were willing to share with me. They identified as trans women, transfemme individuals, trans men, transmasculine individuals, cisgender women, cisgender men, intersex individuals, and folks who fall under another gender identity, such as nonbinary, genderqueer, and genderfluid. A majority of those who shared their sex and/or gender identified as cisgender women, assigned female at birth (AFAB) nonbinary individuals, or trans women. When it came to sexuality, there were folks who identified as lesbian, queer, bisexual, pansexual, asexual, demisexual, gay, or a variation of those listed prior (for example, lesbian/queer, bisexual/pansexual, lesbian/demisexual, gay/queer, et cetera).

The survey was open to participants at least 18 years of age. Survivors who disclosed their age ranged from Participant G at age 20 to Participant R at age 44. Survivors started experiencing sexual violence at very young ages. Participant GG was the youngest when the violence began, before age one. Participant B was the oldest, at the age of 25. Some survivors

were unsure of their age when the violence occurred; many experienced prolonged and/or repeated trauma over many years or at various ages. Participant F, for example, experienced repeated sexual violence at the ages of three, four, 13, 15, and 18 through 23; Participant GG experienced prolonged violence from under age one to 16 years old, and then again at age 21.

About 40 percent of the respondents who shared their race identified as White. I wish I could have drawn a more diverse pool of participants, since sexual violence impacts other populations as well. Uplifting the voices and stories of survivors of Color is essential as well, as they are often excluded from advocacy, news, and research. Those who shared more about their race and/or ethnicity listed that they were White, Latina/o/x, Black, Hispanic, Irish, Southwest Asia and North Africa (SWANA), Slavic, German, British, Iraqi, Columbian, European, Nordic, Jewish, Nigerian, Indigenous, Afro-Seminole, Guatemalan, Afro-Indigenous, African American, Filipino, and/or a mix of two or more races/ethnicities (for example, Iraqi and Columbian, Filipino and White, Mexican and Guatemalan, Black and Mexican, et cetera). Survey responses came from at least four countries: most from the United States of America, two from Ireland, one from Poland, and one from Mexico. When I launched the survey in October of 2024, I expected perhaps 12 responses at the most, and assumed they would likely all come from the USA, so I felt honored that so many people were willing to share such vulnerable information with me.

Defining Home

To understand how LGBTQIA+ survivors of sexual violence interact with their homes, we first need to have an understanding of what "home" is for each individual. The majority of the survivors in this case study are currently renters (renting and living alone or with others), five own a house or a condominium, five live in a shelter, four live with their parent(s), and four live

in student housing. Many survivors had sought to relocate immediately following the violence, or later in life when they were able to. Some survivors experienced sexual violence outside of their homes; these individuals were less likely to relocate than those who experienced violence where they lived. A few individuals moved just a short distance away; for example, Participant LL moved about 20 to 30 minutes away from where the violence occurred. Others took more drastic measures and moved out of state or even out of the country where the violence occurred (Participants B and DD relocated to different countries). The idea of "home" looks different for each survivor as some have an entire apartment space to themselves, some own a house with their family, or some reside in a shelter with dozens of other individuals. Defining "home" can be a challenge when everyone's experiences within a space look different.

Interactions in a Home

Many participants experienced geotrauma and a need to control their space as much as possible. Two significant, if contradictory trends appeared. A substantial number of respondents felt the need to "queer their space" by doing things to assert their queer or trans identity, such as hanging up pride flags, queer art, or photos of their partner(s). In contrast, a smaller number of respondents reported "de-queering their space" due to fear of again being targeted for being LGBTQIA+. These survivors reported doing things such as taking down their pride flags, removing signs indicating their identity or political views, and going to extra lengths to hide their identity from the public eye.

Geotrauma is a term coined by geographer Rachel Pain, who uses it to describe "the ongoing clasping of [trauma] and place" (Pain 2020). Geotrauma suggests that trauma can be located beyond just the mind and body and expand into structural, social, and environmental

contexts around us. Geotrauma is often ongoing or prolonged over time; it usually is repeated across multiple incidents. Some survivors may only experience sexual violence once; however, many are in situations where these incidents occur on multiple occasions and continue to shape their perceptions and interactions with space. Most of the survivors who participated in my survey experienced numerous instances of sexual violence. These repeated geotraumas constantly shape their spaces and contribute to the formation of places.

“Queering” Space

I was not expecting so many participants to share that they partook in what I label "queering" space. A clear and straightforward example of this can be seen in Participant E's response to the question, "Sometimes survivors change things about their home to feel more comfortable. Since experiencing the violence, have you changed anything about your home/place of residence?" Participant E shared,

“I had to prove my queerness. I hung up lots of pride decor and my art to make the space my own.”

Participant V conducted similar actions, stating,

"I have moved entirely and queer-ified my space with new pride flags and such. After my assault[,] I felt like I had to prove my queerness and transness as my abuser hyper-feminized me and degraded me for being queer and trans. I felt that I had to demonstrate that I am still queer and trans because my body reacted in a way that some may view as liking it."

Participant O engaged in queering space as well. She wrote,

“I moved entirely after being raped and held hostage. I originally lived with my parents and grandpa. One day, my parents found out I was bisexual when they came home and found me making out with my girlfriend in high school at the time. My parents weren’t mad. They never spoke [negatively] about the queer community or anything like that, so I guess it was nice they didn’t freak out. I oddly don’t think they were even surprised despite me never expressing being bi. They just seemed really chill about it. We knew my grandpa was more conservative and easily angered and abusive, so we always thought I should keep it a secret since he lived with us. It kind of sucked not to be able to express myself in my own home, but I understood why. But one day[,] years later[,] my grandpa found out. A few days later[,] my parents were out of town. I came home from work[,] and when I came inside[,] my grandpa was sitting on the couch with a gun. He made me give him my phone and took me up to my room. During the next few days, I was stuck on my twin bed in my childish room with my old stuffed animals staring at me. During the following days[,] my grandpa beat me and raped me, telling me it was a sin to be with a woman and that he would teach me ‘how to be with a real man.’ One night[,] when he was asleep, I made a run for it. I took his gun and booked it out of the house in my shorts and bra. I ran to a neighbor’s house at three in the morning, screaming for help. I think it was by the grace of [G]od that they woke up and let me inside and called the cops. Eventually, my parents and I moved out of that house due to the things that happened there. I am really grateful to my parents for moving us out of a conservative state to one that is more accepting of queer folks. I don’t think I would have been able to stay there. I know this sounds horrible to say, but I am so glad my grandpa is now dead. I finally feel

safe to express myself. He can never harm me again. In my newer room at my parent's house, I have a bed different than the one my grandpa tortured me on. I got rid of most of the stuffed animals that witnessed the violence. When my grandpa did all those things, all I could do was dissociate and stare into the stuffed animal's eyes, praying it would stop. I only kept a few that are sentimental. I hung up new posters and threw out all my old ones before moving. Now that my grandpa is dead and I am safe to express myself, I hung up a bi pride flag. It proves to me that my bi identity is real and valid and that my grandpa can never hurt me for my sexuality again. I also have bought a lot of art from queer artists to support my community and feel like other queer people are with me in my space. I also identify as polyamorous and am currently in a relationship with a beautiful woman and a wonderful man. I have lots of photos of us all in my room because they bring me joy, and I am finally in a safe environment to express that queer joy. So yes, I have changed things about my home to feel more comfortable. That was a very long answer, so I apologize, but it felt good to discuss that.”

Participant O's experience of relocating and being in a different state and home allowed her to feel free to express herself finally. The concept of queering space could be seen in both the larger scale of moving to a more queer-accepting state, as well as at the smaller scale of a bedroom in her decorating the space to her liking.

Another example of queering space could be seen in Participant D's response:

"I unfortunately still live with my parents, who were the ones who sent me to conversion therapy where I was sexually assaulted and abused multiple times as a way to 'cure' me of being a lesbian. Obviously, conversion therapy did not work as I am still very much

attracted to women and only women. I guess as a way to get back at my parents but also prove to myself that I am still queer, I hung up a lesbian pride flag along with some subtle lesbian flag-inspired colored art. I have a partner and hung up a picture of us together, but I told my parents she is my friend. So, I also hung up photos of me with other friends to help mask that she is my girlfriend. My parents hate the flag and have repeatedly tried to take it down, but I just hang it back up as a 'fuck you, I will always be queer' to them."

Participants E, V, O, and D were just four of many who shared their experiences in queering their space. While Participants O and D live with others, Participants E and V live alone. The majority of those who partook in queering their space in some way live alone, so they may enjoy some comfort and a feeling of safety in expressing themselves in their space.

Upon seeing this trend in queering space, I realized I related to the concept. While it was not my intention to "queer-ify" my home, I partook in this action as well after experiencing sexual violence by cisgender, heterosexual men. Now that I live alone and it is safe to do so, I hung up a lesbian flag right over my bed to remind me that my sexuality is no different than it was prior to the assaults. I also have nonbinary, genderqueer, rainbow, and trans flags in my apartment. I keep a painting I made of the sky using the lesbian flag colors hung up by my bed and have various LGBTQIA+ related paintings and drawings I display around my apartment. My friend gave me a doormat that reads "Gayest Place in Town," which I proudly display at my front door. Along with this, a former therapist gave me queer affirmation cards they made for me that I hang by my front door so I can always see them and be reassured I am okay. There is a poster for the queer indie rock band Boygenius next to my bed because queer musicians bring me

joy. I have an art print displayed where I can see it that reads, “there is still time.” This is a reference to the 2024 movie *I Saw the TV Glow*, which is an allegory for being transgender and explores the theme of questioning reality and identity. “There is still time” is meant to serve as a reminder that it is never too late to become yourself. I feel that this is the most important piece of queer art in my apartment as it reminds me that there is still time to further be my authentic self regarding my sexuality and gender; along with this, it perpetuates the idea that there is still time to heal from the traumas that have been done to me. In a way, I feel that queering the space of my apartment has allowed me to begin healing and associate positive feelings with specific places in my apartment. I wonder if, for others, queering their space has allowed them to heal as well. I also ponder if other survivors feel “there is still time” to heal and transform their places into positive ones. These are two questions I would love to ask in future research.

Figure 1. Photograph of a “queered” wall



This picture was taken by the author, Vanessa Katherine Hardin, in 2025.

“De-queering” Space

On the opposite end of the spectrum, a few participants reported “de-queering” their space. Participant H lives in a shelter; the only space they consider their own is their bed and the small cubicle-like wall next to it. Participant H shared,

"At my old shelter, I used to hang up my miniature pride flags and stickers on my locker next to my bed so anyone could see them. However, this is how my rapists knew to target me for being a lesbian. Now, I don't hang anything up at my new shelter indicating my sexuality. I just have a stuffed animal on my bed to make it feel like my space but not reveal too much about my life."

Participant N, a trans man, also opted to de-queer his space after experiencing assault by his roommates in a male-assigned living space on a college campus. These roommates found out he is not cisgender and was assigned female at birth after entering his private room in their apartment and seeing his trans pride flag. They raped him and repeatedly harassed him until he was able to move into a different dorm. Participant N says,

"Yeah, after being raped and sexually harassed for an extended period, I requested to move dorms. The worst part was that this wasn't even my first time being raped. It's just the last time didn't feel as traumatizing as this situation did. Once I finally moved in with some new guys, I was on high alert and decided to change up my new room's format compared to my previous one. I did not hang up my trans flag or anything else that would give away the fact that I am trans and going stealth. I had a trans pride colored plushy, but I hid that in one of my suitcases with my flag and previous pictures of me and my friends where I didn't pass as well as a man. I put a lock on that suitcase too[,] just in case

someone [was] to ever snoop through my room, so they wouldn't be able to get into the suitcase without knowing the combo. I wanted to rid my space of anything that would give me away for my safety and to prevent anything like this from happening again."

Participants H and N are just two respondents who felt the need to de-queer their spaces for their safety. Most survivors who engaged in de-queering their spaces also have roommates, fellow shelter residents, or family members living with them. These participants all still live relatively close to their abusers, whether on the same college campus, in the same neighborhood, or the same city, and feel a continuing need to protect themselves by hiding their sexuality or gender identity.

Despite the majority of survivors who partook in de-queering their space living with others, one participant, Participant Z, who partook in de-queering his space, lives alone and did not mention if he still resides near his abusers. While Participant Z did not have a "queer" space prior to the assault, his assault made him not want to express his queerness in his home.

Participant Z shared,

"I was in military basic training when I was assaulted. I haven't discussed it before or told anyone because I'm embarrassed to be a guy who experienced it. I thought only one person there knew I was gay, but he told others. One night I woke up to a group of them surrounding my bed. One was rubbing my penis. I told him to stop. I tried to fight him off, but the group jumped in. There were too many of them[,] and they were too strong. They flipped me over and held me down while one shoved a broom handle up my ass. I cried. I never should've cried. Marines don't cry. They called me a 'pansy' and a 'faggot' and told me they knew I liked it. When they were done, I was bleeding. I cleaned up the

best I could and went back to my bed. Throughout the rest of training, I spoke to no one unless required to. After many years, I left the Marines. I live alone now, so I should feel comfortable expressing myself in my home, but I avoid displaying any ‘gay pride.’ Hell, I even avoid keeping a broom around the house because of the broomstick being used. I mostly live a closeted life now due to that assault. Whenever people visit, I want my home to appear as a happy, straight man’s. I have no rainbow flag, no partner, no pride stuff. I will take this to my grave, and if that means hiding all gayness from my life, I will do what I have to do.”

Participant Z’s story shows us how LGBTQIA+ survivors may partake in maintaining a “straight-passing” environment after experiencing sexual violence. This may be due to a fear of being targeted again for identifying as LGBTQIA+, or it may be done to hide or erase any memories surrounding the assault(s).

General Observations

When it came to general observations not necessarily related to being LGBTQIA+, survivors had various relationships to places within the spaces of their homes. Some felt safe in their own bedroom, while others found that being in their bedroom provoked anxiety. Those who still live with their perpetrators understandably do not feel safe in their living situations. Survivors who experienced violence outside of their home found it easier to locate safe places within their home. In contrast, those who experienced violence within their home had trouble identifying areas where they felt secure in their place of residence. They often suffer from chronic fear. Participant JJ, for example, shared,

"I do not feel safe anywhere in my house because I still live where I was raped by a group of men. I am constantly on edge when I am home despite having roommates who are considerate of my anxiety and do things to try and help make our apartment feel secure."

When asked if there were any locations that participants avoid, a few stated places that could be connected to the outside of their home. Participant Q shared,

"[I avoid] the common area [of my home]. It has never felt safe to me to be there alone because it's accessible to the outside."

Similarly, Participant E stated that,

"I get paranoid about the front door. I never know who could be lurking outside it. I have become slightly agoraphobic because I am scared to go outside sometimes. I often catch myself repeatedly unlocking and locking my door to be sure it is secure and that no one can get in."

Participant H also developed a fear of being outside and said,

"I cling to my bed space a lot at my new shelter. I also tend to cling to staff members I feel safe with to try and avoid predators. I don't go outside much, especially on my own. If anyone invites me out, I typically turn down the offer. I stay near my bed because it is my space, and no one is allowed to be near others' beds. I know I should go outside more for my health, but I am scared to even just stand right outside the shelter[,] even with security watching because who knows what may happen outside."

Geographic Dissociation

Many of my participants feel a sort of geographic dissociation within their homes.

Geographic dissociation is where an individual will attempt to control and create their ideal

space by separating themselves spatially and temporally from a place that holds memories they would rather not associate with (Willis et al. 2016). As the literature I reviewed suggested, geographic dissociation was emphasized by LGBTQIA+ survivors describing how sexual violence had affected them at the scale of the home.

Survivors who experience geographic dissociation use it to try to shape the spaces in which they are forced to exist. If a space does not feel "just right" due to the fear created by sexual trauma, there may be a feeling of uneasiness. Some survivors, such as Participant B, expressed that they feel no connection to any of the places within their home because nothing "feels right" about their home. Those who relocated to a different home after experiencing sexual violence had higher rates of feeling safer or at ease in their space. Participant U, for example, shared,

"I [didn't] enjoy living in Southern California, specifically in Orange County[,] because this is the area my abuse took place. I've lived out of state for a year[,] and I always really enjoy the feeling of lightness I feel away from Orange County."

This feeling of "lightness" could potentially be compared to a state of ease and comfort that came with relocating.

Participant E stated,

"I currently love the space I am in because it is the first place I am living in where no violence occurred, and it is my very own. I find my bed to be a safe place because it is one no one but me has been in."

Participant E was able to pinpoint that their bed is a place within the space of their home. This brings me to the following results on how survivors find places within the spaces of their homes.

Finding Places Within the Space of a Home

In my survey, I gave survivors context about the difference between spaces and places in geography. In short, I described a space as any site that can be located, whereas a place is a space, but with meaning. A place is a space we associate with a memory or memories and/or feeling(s) (positive, negative, or neutral). Based on these definitions, I asked survivors to identify places within the space of their home or any spots within their home that hold meaning to them. Participant J, who still lives in his childhood bedroom where the violence occurred, could identify spots in his family's home that are just spaces to him and places that hold meaning within the space of his home. He writes,

“My parents' home is a space, but my bedroom is a place due to the violence always occurring there. My bedroom is also very small, as was my abuser's, so I have trouble when I am stuck in other small rooms as they remind me of the place of my bedroom and my abuser's room.”

The geotrauma from experiencing multiple forms of sexual violence within small rooms has impacted Participant J's ability to feel at ease within small spaces, as the memories cause him to hold negative attributions to those places. Participant K also shared locations within their home that they differentiated between spaces and places. However, Participant K's experiences with space and place seem to hold more positive feelings. Participant K shares,

“My bed is a [p]lace. It is where I find refuge and comfort in stuffies and rest. It is where my body feels most free and most protected. My couch is a space, a placeholder, a clean laundry dump space. My kitchen is a [p]lace, an environment which is exciting[,] rewarding[,] and healthy. My dining table is a [p]lace for eating meals I worked hard for,

for writing letters to loved ones, [and] for writing journal entries by candlelight. My table is where I sit and drink coffee as the marathon athletes run by, a place where I consistently reward myself and fill my own cup.”

Unlike Participant J, Participant K lives in a new place where the abuse did not occur. This could contribute to the fact that they associate more positive feelings to the places in their home.

As mentioned in the previous section, those who experienced sexual violence outside of their home found it easier to locate safe places within their home. Survivors who experienced violence within their home had trouble identifying areas where they felt secure in their place of residence. If a survivor did experience sexual violence within their home, they were often only able to identify one or two places within the space of their home where they felt safe and identified more places that held negative associations due to the geotraumas that occurred there.

For example, Participant V stated,

"I interact with my bedroom heavily as it feels like a safe place for me. I always lock my bedroom door. I avoid the bathroom[,] though. I still get anxiety in bathrooms because my abductor waterboarded and raped me in there as well as in his bedroom. I definitely think this is connected to the sexual violence I experienced. So, my bedroom is a place in a positive way. But the bathroom is a negative place due to the trauma that occurred in my abductor's bathroom."

This statement from Participant V shows us that there can be both positive and negative associations to places within the space of a home. Participant EE still lives where the violence took place and shares,

"I don't really have any positive associations to places in my apartment. All of them are negative. I used to be in a relationship, and the sexual abuse from that partner would happen all over my apartment, so nothing really feels safe. I am always anxious. My whole apartment feels like a place, just in a negative way though, because all of my feelings in this place are negative and anxiety filled."

Participant P, on the other hand, has moved away from where the abuse took place and was able to easily identify a safe place within the space of their home, stating,

"In my room, my bed is a place. I feel safe here because the person that assaulted me has never been anywhere near it. My bed is my own[,] and I invite who I want to it[,] and I'm in charge of what happens to my body there."

This statement from Participant P feels very empowering, and I am glad that they were able to find some form of positive control over their home.

Conclusion

These results were formed thanks to the diverse perspectives and experiences of the 38 survivors of sexual violence. Each survivor had a different definition of home, as no two survivors had the same experiences or lived in the same space. Contrasting responses emerged from my survey. LGBTQIA+ survivors who lived alone reported feeling a need to "queer their space" by doing things to remind them of or prove their queerness or transness. Survivors who lived with family members or roommates more often "de-queered" their space out of a feeling of fear of being targeted for being LGBTQIA+. Survivors who had experienced violence outside of their current residence found it easier to locate safe places within their homes; those who had experienced sexual violence at home had trouble identifying areas in their home where they felt

secure, even if they had moved to a new residence. Geographic dissociation caused by the geotrauma of sexual violence also affected some survivors. Those who experienced sexual violence outside of their home sometimes find it easier to locate safe places within their home, and those who experienced the violence within their home may have trouble identifying areas where they felt secure in their place of residence. Ultimately, each LGBTQIA+ survivor has their own unique experiences when it comes to defining place at the scale of the home.

Chapter 5: Discussion

Differences and Similarities in the Literature and My Research

In my study, I was able to achieve participation from 38 individuals. In research previously done by geographers in my literature review, many authors recruited fewer individuals. However, their study methods involved one-on-one interviews and focus groups, which may have led to a decline in interest in partaking as interviewing and focus groups remove the anonymity factor my survey offered. Geographers in my literature review did receive more diversity in age range, though, so I admire their methods of outreach.

In the literature I reviewed, geographers and psychologists alike have confirmed that experiencing trauma may lead survivors to feel as though they have no control over their environment. This leads them to find ways to gain some form(s) of control over their space (Donovan and Ustundag 2017; Pain 2014b; Pain 2020; Pain 2009; Herman 1992, Pain 2015; Pain 2014a; Pain 1991; Willis et al. 2016). In “Spaces of dissociation: the impact of childhood sexual abuse on the personal geographies of adult survivors,” by Willis et al., the authors explore how fear and trauma shape space and a survivor’s personal geographies. It is mentioned that survivors may be viewed as “controlling” or suffering from obsessive-compulsive disorder due to the ways they try to take control of their environment. The fear caused by experiencing sexual violence is the reason for this attempt to control space. Some may view this need for control as harmful; however, geographers, psychologists, and activists advocate that the utilization of controlling space can be a healthy thing as it allows survivors to find and gain power back in

their lives (Willis et al. 2016). Throughout my study, my participants engaged in actions similar to those of the participants from articles in my literature review. Many described taking action within the space of their home to feel in control.

One example of this can be seen in Participant H's actions:

“I like to keep my bed in the corner of the room so I can see all angles of my room. I avoid having spots that can be easily hidden by keeping my closet full. I also have my door locked at all times.”

Participant H maintains control of the place of their bedroom by keeping the bed in the corner, avoiding creating hidden spots, and locking their bedroom door. These actions stem from trauma and shape the personal geography of their bedroom. While I would not call this following example controlling, I think it is an excellent way that Participant II took just a small step to instate some form of control over a shared space and establish that the space is theirs and it is safe. Participant II states,

“I share an office with my dad[,] who sexually abused me. I hung a poster in my office supporting survivors. It made me feel like the office is mine and a safe space for me as well as my clients.”

I think the trends of “queering space” and “de-queering space” that appeared in my research are also excellent examples of how survivors take control of their environment as they made decisions about how to present the space of their home to meet their needs. Therefore, I would argue that my research is consistent with the findings in former articles regarding controlling space.

In my literature review, I predicted that geographic dissociation would be heavily emphasized for LGBTQIA+ survivors. Willis et al. 2016 define the idea of geographic dissociation as an attempt to control and create an ideal space by separating spatially and temporally from a place that holds memories they would prefer not to associate with. This prediction rang true as many survivors took actions to distance themselves from the source of the trauma. Examples of this that participants in my research shared include moving to a different home or even country, state, or city, changing bedrooms, avoiding taking showers, or seeking a safe community away from where the violence occurred.

Things I Would Do Differently

Though I enjoyed my research techniques, there are a few things I would like to have done differently or would consider implementing in future research. I feel the Qualtrics survey format was a successful method, as it allowed survivors to remain anonymous. Allowing for anonymity likely contributed to survivors' comfort in sharing details from their traumatic experiences with sexual violence. However, if I could have, I would have loved to have conducted interviews with those who showed interest. I could not engage in an interview process as I would have been required to report survivors to the Title IX office if they ended up being participants who went to the same school as me. Thankfully, in my survey, no one disclosed what school(s), if any, they attended. Reporting a survivor's sexual violence experience(s) would likely lead to a break in trust. In future research, I may be able to engage in interviews with those who feel comfortable.

A minor change I would have added to the survey I made for this study would be to include the question, "What pronouns do you use?" I find it embarrassing that I did not include

this question, as I believe correct pronoun usage is important. I included the question, “What is your sex and/or gender?” A few folks included their pronouns by giving responses such as “trans man, afab, he/him,” “afab nonbinary, and I use they, them, and theirs pronouns,” or “cis man, he/him.” I always want to respect pronouns when possible, so for those who included their pronouns, I used them; for everyone else, I stuck to using the gender-neutral pronouns “they, them, theirs” as the “they” series is typically regarded as an inclusive pronoun set. I am disappointed in myself that I did not ask this question, especially as someone who uses pronouns outside of the binary pronoun sets.

In past projects, I have included an art element in my research, where I allowed participants to share things such as photos, drawings, paintings, poems, or collages relating to the topic. This has been a success for prior research I have done. However, I offered survivors the option to do this at the end of my survey by saying, “Totally optional! If you would like to submit an image or drawing, you can do this here. This can be a sketch of your favorite place in your house, a drawing to display how you feel in your bedroom space, a photo of an important place in your home, a picture to show how you feel in your space, a collage of how you arranged your room to fit your needs, et cetera.” I only received two responses: one drawing and one photograph. I think that may have seemed like an invasive question to some, as sharing visual details about one’s space may feel too revealing. I would have opted to skip this question had I been given the opportunity to do things differently.

I believe my research could have been further enriched by digging deeper into the mental health aspects that occur after experiencing sexual violence. This would have included exploring issues that appear after experiencing geotrauma, such as depression, anxiety, PTSD or C-PTSD,

self-harm, suicidal thoughts, dissociation, or sleep issues and disorders. Sexual violence has an enormous impact on mental health, and this can contribute to a survivor's perception of spaces and actions that are carried out in spaces.

In my literature review, I mentioned how spaces and places constantly evolve, so a person's perception may change over time. Because of this, a survivor's interactions with a space or place may change with time as well. Looking back, I wish I had asked more about changing perceptions of space and place as time goes on. I believe hearing more about this from survivors would have been beneficial, and I regret not digging deeper into this topic. I also mentioned in my literature review that sometimes, survivors find liberation in returning to the site where the sexual violence took place, as they may find healing through facing the fear of returning. I think I was so focused on the negative associations of place that I should have asked more questions about positive and empowering experiences of reclaiming the place of the trauma. Some examples of reclaiming space could be seen in the shared stories from survivors, especially when it came to queering space, as these participants worked to create places that feel safe and accepting. Despite this glimpse into reclaiming places, I wish I had further explored this topic. In future studies, I think exploring what leads to liberation in a place of trauma would be great. This brings me to the next subject of research I would like to engage in in the future.

Future Research Ideas

In my results section, I proposed the idea of a future research project about learning if queering space has allowed survivors to feel they are healing. I also questioned if other survivors feel there is still time to heal and transform their unsafe places into positive ones. These are two ideas I would love to ask in future research.

Along with this, I discussed how some survivors have developed a fear of being outside of their homes. For many, this fear of being outside was carried out into specific locations not inside or right outside the home. I want to discuss this as I think looking at how sexual violence creates fear of being out in the world is essential, even if the locations are not home-specific.

Participant C states,

“[I avoid] the mall I’d visit a lot in high school, especially at the movie theater or [C]hipotle.”

Participant E adds,

“I try to stay away from the areas and neighborhood where my assaults occurred. I stray from San Leandro and the neighborhood where I was raped at in S[an] F[rancisco].”

Participant U also shares,

“There is a specific block on the border of two cities I try to avoid when I can because it is near where the abusers currently live.”

Other examples of locations survivors in my study avoid include hometowns, places that smell of marijuana, bars, anywhere that involves visiting family, Bay Area Rapid Transit (BART) stations, music festivals, states other than the one a survivor resides in, college campuses, and places where men frequently hang out. Fear after violence extends beyond the home, and I think in future studies, I would enjoy seeing how survivors interact at these larger scales. Survivors offer a unique perspective when it comes to engaging with space, so seeking more information on how they interact at scales, such as the neighborhood or city they reside in or were assaulted in, could make for excellent future research.

If I were to look at larger scales, I would also love to research the smaller scale of the body and how survivors interact with theirs. I believe this would be an interesting topic to approach. Although it was not a trend in my research, two participants took things a step further than just changing their physical home and engaged in actions to alter the home of their bodies. In my literature review, I discuss how survivors sometimes change their bodies through weight loss or gain, haircuts, tattoos, or other modifications. This inspires me to look closer into these changes in future research. Participant I shared,

“I threw out all my clothes from the time. And since the abuse, I had to get new furniture. But I also view my body as a home. I have gotten tattoos and a lot of piercings, so now I have a body/home he would never recognize.”

Participant LL took a similar approach and said,

“I’ve moved around a lot since then. But (this may be too abstract) I also consider my body to be a home or a place of sorts—and body mods (tattoos, piercings, et cetera) and changes in my physical features have been a coping skill after experiencing trauma.”

I was inspired by what Participants I and LL shared. These two statements made me reflect on my own experiences with sexual violence. In one instance, I was drugged and gang raped at a party, and while I was unconscious, I was branded, cut/stabbed, and beaten to the point where I ended up in the hospital, was covered in bruises, and left with many prominent scars and injuries—some of which required surgeries to fix. The assault was filmed, and multiple videos were uploaded online. I have engaged in actions such as getting new piercings, gaining weight, growing my hair out to the longest it has been in over 17 years, and accumulating numerous new tattoos in places where bruises and scars used to cover. I did all of this to alter my body and

become someone other than the unconscious person who was assaulted in those videos. I also did more extreme things, like have top surgery to change the way my chest looked and to remove scarring from the cuts and stabbings done there during my assault. This was also done to feel more at home in my genderqueer body. I take immense pride in my top surgery scars as these are scars I had the choice to put on my body, my home. I never considered that this could have been a reaction to the trauma I experienced, but now, looking back, I acknowledge that my experiences contributed to my altering of self to feel at home in my body and look like a new person that my perpetrators could not find. The idea of studying how sexual violence impacts the body and researching the spatial interactions that occur at the scale of the body could make for a promising future project, especially given the fact that I have my own relationship with this subject.

Anything Else Survivors Wanted to Share

At the end of my survey, I asked participants, “Is there anything else you would like to share?” I received many responses to this question. A lot of survivors thanked me for doing this and allowing them to get things off their chests. Many described it to be a healing process, and I also found it healing for myself. Some disclosed that this was their first time sharing with anyone and opening up about the violence they experienced. There were a few folks who also used the space to go into more detail about their assaults, giving vivid details about the sexual violence they experienced and using the space to vent. I appreciated that individuals were able to trust me and feel comfortable enough to disclose some of their most traumatic experiences. Participant K shared,

“Since my trauma happened in someone else’s home, I was not expecting it to impact me feeling safe at home even if I was alone. As I grow older[,] I am becoming more open to trying new things again and letting myself ride out a process that I am not in control of, but one I can influence. I am privileged to have a community supporting me in navigating this recovery[, even] if many of them are unaware of this aspect of my personal history.”

The aspect of community is a beautiful one, and I am glad Participant K has found individuals who support them in their recovery, even if Participant K does not share all the details of the violence.

One of my favorite statements, and I think a rather beautiful one, that has stuck with me throughout this entire process was a quote from Participant I. It reads:

“My body is my most sacred home, and it’s the only one I’ll take to my grave. I choose to make it a space of celebration, so his abuse doesn’t overtake it. His abuse will never be at home with me.”

The idea of treating your body as your home and as a place of celebration is beautiful, and allowing your body to be separate from the violence that took place takes power and strength.

Chapter 6: Study Conclusion

Through this thesis, I set out to investigate the ways in which experiencing sexual violence shapes and impacts LGBTQIA+ survivors' interactions within the space and place in their homes.

A review of the literature surrounding the geotrauma of sexual violence demonstrated that the LGBTQIA+ population has frequently been excluded in previous studies on sexual violence and spatial interactions. This gap in the previous research contributed to my motivation for this study. By reviewing the geographic literature on sexual violence, I was able to develop a way to explore the ways in which LGBTQIA+ survivors interact within the space and place of their homes. I designed my research as a qualitative case study.

I chose to capture data via an in-depth anonymous survey. This method allowed me to identify patterns, themes, and specific information from survey responses. I collected data from 38 LGBTQIA+ survivors of sexual violence residing in four countries: the United States of America, Ireland, Poland, and Mexico. Discourse analysis, specifically narrative analysis, were used to understand the trends and stories that survivors shared. This process allowed for an understanding and respectful discussion on how LGBTQIA+ survivors interact within their homes. This work contributes to the geographic literature surrounding the geotrauma of sexual violence by directly approaching LGBTQIA+ survivors as the study population.

Those who partook in my study survey expressed a variety of genders, including trans women, transfemme individuals, trans men, transmasculine individuals, cisgender women, cisgender

men, intersex individuals, and folks who fall under another gender identity, such as nonbinary, genderqueer, and genderfluid. In terms of their sexuality, participants identified as lesbian, queer, bisexual, pansexual, asexual, demisexual, gay, or a variation of those listed. Participants came from multiple races and ethnicities, but I wish I could have drawn an even more diverse pool of participants. Survivors ranged in age from 20 to 44 but started experiencing sexual violence at much younger ages. Many experienced this violence more than once or over a prolonged period of time. These multiple and prolonged exposures contributed to shaping space and place for LGBTQIA+ survivors.

Every survivor had a different definition of home, as no two survivors' living situations and experiences within a home are identical. Participants identified with renting, owning a home, living with family, staying in student housing, or residing in a shelter. Some survivors experienced sexual violence within their homes, and some experienced it outside of the home; yet in this study, experiencing sexual violence impacted the way all survivors interact with their homes.

The two primary trends that emerged from this study are that LGBTQIA+ survivors of sexual violence partook in “queering their space” and “de-queering space.” “Queering” of space was done to assert queer or trans identities. In contrast, some folks “de-queered” their space after experiencing the geotrauma of sexual violence due to fear of being targeted again for being LGBTQIA+. There were also general observations about survivors' experiences with their homes that were not necessarily related to being LGBTQIA+. Some felt safe in their own bedroom, while others felt that being in their bedroom provoked anxiety. Those who still live with their perpetrators do not feel safe in their living situations, as is expected for all survivors, regardless

of gender and sexuality. Those who experienced violence outside of their home found it easier to locate safe places within their home, whereas those who experienced violence within their home had trouble identifying areas where they felt secure in their place of residence.

Many of my participants developed geographic dissociation in an attempt to control their home space by separating themselves spatially and temporally from places that hold memories they would prefer not to associate with. Survivors experiencing geographic dissociation used it to try and shape the spaces in which they are forced to exist to feel “just right.” Survivors were able to identify various places within the space of their homes. Bedrooms, bathrooms, dining tables, beds, and entire apartments are examples of some of those places. Not all of these associations to place were positive; some were negative due to the geotrauma(s) that occurred.

Before I began this project, I did not have many predictions on how LGBTQIA+ survivors would interact with the space and place of their home, as I was not sure if there would be any differences between LGBTQIA+ and cisgender heterosexual survivor interactions. I just wanted to include LGBTQIA+ survivors in research as they have frequently been excluded. I predicted that for LGBTQIA+ survivors, there would be high rates of geographic dissociation, which proved to be true. While my participants validated this expectation, they also contributed new insight. There ended up being differences that LGBTQIA+ survivors conduct in their homes after being assaulted, including “queering” and “de-queering” space.

It is essential to include LGBTQIA+ individuals in sexual violence research within geography and geotrauma research as a whole, as we have often been excluded. LGBTQIA+ individuals are an integral part of our society, and our lived experiences are crucial to research. The limited research in geography on trauma has emphasized White, cisgender female,

heterosexual, middle-class, housed voices and portrays their experiences as if these were universal. Strictly highlighting these voices and stories is an issue, as they are the ones that are continually emphasized in the media and research. Many survivors do not have the privilege of having a support system, job, counseling, or even being alive. People of color, LGBTQIA+ folks, those with lower incomes, or other disadvantaged groups may have different experiences as survivors who benefit from some form of privilege. In the future, I would love to study further various traumas amongst marginalized communities and how those experiences shape interactions with space and place, as their voices and stories are essential for gaining a more diverse and complete view. Expanding beyond the White, upper or middle-class, housed, female, cisgender, and heterosexual experience is necessary for advancing research on trauma in geography. Otherwise, we contribute to further perpetuating harm against marginalized survivors and communities by colonizing stories of survival.

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Appendices

Appendix A: Survey Questions and Layout

Data collected from this confidential survey will be used for completion of a master's degree in Geography at San Francisco State University. The information gathered will be used for research on how sexual violence affects LGBTQIA+ survivors at the scale of the home.

The survey questions will be about interactions LGBTQIA+ survivors of sexual violence have in their home. You have been invited to participate because you identify as LGBTQIA+ and have experienced sexual violence.

You must be 18 years of age or older to participate. There are no risks or benefits to you in participating in this survey. You may choose to participate or not. You may answer only the questions you feel comfortable answering, and you may stop at any time. If you do not wish to participate, you may simply return the blank survey, with no penalty to yourself. If you do participate, completion and return of the survey indicates your consent to the above conditions. Your decision whether or not to participate in this research will have no influence on your present or future status at San Francisco State University.

Please do not include any information that could identify yourself or others on this form. Do not provide any names, addresses, identifying pictures/drawings of yourself, et cetera. The survey should take approximately 20 minutes to complete. Any questions or concerns should be directed to the Human and Animal Protection office at protocol@sfsu.edu.

If any feelings arise during this survey and you would like to take a break or stop completely, please feel free to do so. Do not be afraid to reach out to these sources if you are in need of support.

- National Suicide Prevention Lifeline: 988 and the website offers chat options
<https://suicidepreventionlifeline.org/>
 - Crisis Text Line (self-harm, suicide, depression, anxiety, eating disorders, COVID-19 support, et cetera): Text HOME to 741741 to connect with a crisis counselor.
<https://www.crisistextline.org/>
 - National Sexual Assault Hotline: 1-800-656-4673 RAINN (Rape, Abuse & Incest National Network) Online Hotline/Chat: <https://rainn.org/about-national-sexual-assault-online-hotline>
 - National Eating Disorder Association: <https://www.nationaleatingdisorders.org/help-support/contact-helpline>
 - Domestic Violence Support: <https://www.thehotline.org/>
 - Child Help (child abuse): <https://childhelpline.org/>
1. You will remain anonymous for this survey. Your information will not be shared without consent. The only individual with access to this form is myself, Vanessa Hardin, and I will not share anything without consent.
 - a. I consent to participating in this research and having anything I submit through this form to be used in the researcher's project.
 2. Do you identify as a member of the LGBTQIA+ Community? Feel free to specify your identities.

- a. Textbox
3. What is your sex and/or gender?
 - a. Textbox
4. What is your age?
 - a. Textbox
5. How would you describe your race(s)?
 - a. Textbox
6. How would you describe your ethnicities?
 - a. Textbox
7. What country do you reside in?
 - a. Textbox
8. What is your housing status (i.e., own a house, renting, dorming at a college, living in a shelter, unhoused, et cetera)?
 - a. Textbox

If any feelings arise during this survey and you would like to take a break or stop completely, please feel free to do so. Do not be afraid to reach out to these sources if you are in need of support.

- National Suicide Prevention Lifeline: 988 and the website offers chat options
<https://suicidepreventionlifeline.org/>
- Crisis Text Line (self-harm, suicide, depression, anxiety, eating disorders, COVID-19 support, et cetera): Text HOME to 741741 to connect with a crisis counselor.
<https://www.crisistextline.org/>

- National Sexual Assault Hotline: 1-800-656-4673 RAINN (Rape, Abuse & Incest National Network) Online Hotline/Chat: <https://rainn.org/about-national-sexual-assault-online-hotline>
- National Eating Disorder Association: <https://www.nationaleatingdisorders.org/help-support/contact-helpline>
- Domestic Violence Support: <https://www.thehotline.org/>
- Child Help (child abuse): <https://childhelphotline.org/>

9. What age(s) were you when you experienced sexual violence?

a. Textbox

10. If you are comfortable, can you share the type of sexual violence you experienced? For example, rape, sexual assault, childhood sexual abuse, et cetera.

a. Textbox

11. Where did the sexual violence occur (i.e., in a childhood bedroom, an abuser's house, at a party, walking around a street, et cetera)?

a. Textbox

12. Do you live alone or have housemates? How many people do you live with? If you live with others, are they friends, relatives, or other individuals?

a. Textbox

13. Do you still live where the violence took place? If not, when and why did you move?

a. Textbox

14. Do you know anything about the person who attacked you? If you are comfortable, feel free to share more about them (i.e., were they also queer, did you know the individual, et cetera?).

a. Textbox

Time for a mini geography lesson before we proceed.

In geography, we define a SPACE as any site that can be located. Really, anywhere can be a space. A country can be a space. Your school can be a space. Your bedroom could be a space. The Target at your local mall is a space. Spaces are anywhere and everywhere!

PLACES are spaces, but with meaning! So, a place is essentially a space that we associate with some kind of memory or feeling (positive, negative, or neutral). For example, you may go to the McDonald's by your house and think nothing of it, so it is just a space. But if there is a park your wedding took place at, you might consider that a place as you associate the memory of getting married there. I consider Paris a SPACE because I have never been there and have no memories to associate with it; however, I consider the Golden Gate Bridge a PLACE because I associate it with happy and freeing memories. Places are very much subjective as not everyone is attached to the same spaces.

SPATIAL INTERACTIONS are how we interact with space and place. What do we do in these spaces and at these places? What do you do in your bedroom? What is typically done in a classroom? When you go to the park, what do you do there?

And finally, SCALE. Spaces and places exist on various scales, from being quite large to small. A few examples of large scales could be the scale of the universe, the scale of Africa (country), the scale of the northeast (region), the scale of California (state), or the scale of

Portland, Oregon (city). Smaller scales could include the scale of a household, the scale of a bedroom, or the scale of the body. For this project, I am looking at how folks interact at smaller scales. I am seeking answers to the question of “How do LGBTQIA+ survivors interact with their space and place at the scale of their home?” This means I am looking at how the scale of an individual's body interacts with the scale of a home.

15. How do you interact with where you are currently living? Are there areas you avoid in your home/place of residence or interact with heavily? Do you feel like this is connected to the sexual violence you experienced? Please explain.

a. Textbox

16. Are there any specific spots in your home/place of residence that hold meaning to you (do you view it as a space or place)? Feel free to elaborate.

a. Textbox

17. Do you feel there are particular places within the space of your home/place of residence? For example, you may consider your room to be a space, but your bed and desk are places within the room (i.e., maybe something traumatic happened in your bed, so your bed may hold meaning for you within the space of your room). Feel free to be as descriptive or vague as you want.

a. Textbox

18. Do you avoid certain areas of your home/place of residence?

a. Textbox

19. Are there other places in the world you avoid?

a. Textbox

20. Are there specific areas of your home/place of residence that you consider a safe space?

Or do you consider your entire home/place of residence to be one?

a. Textbox

21. Sometimes survivors change things about their home to feel more comfortable. Since experiencing the violence, have you changed anything about your home/place of residence?

a. Textbox

22. Is there anything else you would like to share?

a. Textbox

23. Totally optional! If you would like to submit an image or drawing, you can do this here.

This can be a sketch of your favorite place in your house, a drawing to display how you feel in your bedroom space, a photo of an important place in your home, a picture to show how you feel in your space, a collage of how you arranged your room to fit your needs, et cetera.

a. File upload

Appendix B: Resources

1. No More Global Directory
 - a. Offers a comprehensive global directory that helps connect survivors to domestic and sexual violence services in over 200 countries. The directory is searchable by country for ease of access to local resources.
 - b. <https://nomoredirectory.org/get-help/>
2. RAINN (Rape, Abuse, and Incest National Network)
 - a. Operates the National Sexual Assault Hotline in partnership with more than 1,000 local sexual assault service providers across the U.S. Offers confidential support both over the phone and through online chat.
 - b. 1-800-656-HOPE (4673)
 - c. <https://rainn.org/>
3. Take Back the Night Foundation
 - a. Dedicated to supporting survivors of all forms of sexual violence. Provides legal referrals and assistance in navigating the legal system.
 - b. 567-SHATTER (567-742-8837)
 - c. <https://takebackthenight.org/legal-assistance/>
4. 988 Suicide and Crisis Lifeline
 - a. The 988 Suicide & Crisis Lifeline provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week, across the United States and its territories. You can also contact them if you

just need someone to talk to. The 988 Lifeline is comprised of a national network of over 200 local crisis centers, combining local care and resources with national standards and best practices. Support can be accessed via phone call, text, or chat on their website. They also offer deaf and hard-of-hearing options for support on their website.

- b. Call or text 988
 - c. <https://suicidepreventionlifeline.org/>
5. Crisis Text Line
- a. Offers support for gun violence, self-harm, suicide, depression, anxiety, eating disorders, LGBTQIA+ issues, politics, et cetera.
 - b. Text “HOME” to 741741 to connect with a crisis counselor.
 - c. <https://www.crisistextline.org/>
6. National Eating Disorder Association
- a. <https://www.nationaleatingdisorders.org/help-support/contact-helpline>
7. National Domestic Violence Hotline
- a. 1-800-779-SAFE (7233)
 - b. Text “START” to 88788
 - c. <https://www.thehotline.org/>
8. Child Help:
- a. For survivors of and those currently experiencing child abuse.
 - b. Call or text 1-800-422-4453
 - c. <https://childhelpline.org/>

9. 1in6

- a. For men who have experienced sexual abuse or assault.
- b. 1-800-656-4673
- c. <https://1in6.org/>

10. NSVRC (National Sexual Violence Resource Center)

- a. <https://www.nsvrc.org/find-help>

11. The Trevor Project

- a. Crisis counselors are trained to answer calls, chats, or texts from LGBTQ+ young people who reach out on their free, confidential, and secure service when they are struggling with issues such as coming out, LGBTQ+ identity, depression, and suicide.
- b. 1-866-488-7386
- c. Text “START” to 678-678
- d. <https://www.thetrevorproject.org/>

12. Pandora’s Project

- a. Pandora’s Project offers peer support to anyone who has been a victim of rape, sexual assault, or sexual abuse through their online message board, chat room, and blogs at Pandora’s Aquarium. The rape and sexual abuse online support group has specific forums for adults, teens, older survivors, LGBTQIA+ rape and sexual abuse survivors, and friends and family of survivors. Pandora’s Project also provides a resource list for International Crisis Centers and Hotlines.
- b. <https://pandys.org/>

13. Make the Connection

- a. Make the Connection is an online resource for veterans to share experiences and obtain resources about sexual violence.
- b. <https://www.maketheconnection.net/conditions/military-sexual-trauma>

14. National Human Trafficking Hotline

- a. English and Español
- b. 1-888-373-7888
- c. TTY: 711
- d. Text 233733
- e. Email help@humantraffickinghotline.org
- f. <https://humantraffickinghotline.org/en>

15. End the Backlog

- a. A Joyful Heart Foundation project working to end the rape kit backlog in the US.
- b. <https://www.endthebacklog.org/get-help/>

16. Office for Victims of Crime

- a. This website provides resources and links to US state-specific victim compensation and assistance.
- b. <https://ovc.ojp.gov/help-for-victims/overview>