The State of Trans* and Intersex Organizing

A case for increased support for growing but under-funded movements for human rights
Acknowledgments

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We are grateful to the hundreds of trans* and intersex activists who took time out from their important work to respond to the survey and share their stories with us. We hope this report will serve and advance their work.

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About Global Action for Trans* Equality (GATE): GATE is a global trans* organization that works on trans* rights at the global level, supports trans* movements worldwide and makes critical knowledge and resources available to trans* activists. GATE focuses on the reform of the International Classification of Diseases, access to funding for trans* movements, and global HIV policy.

About American Jewish World Service (AJWS): American Jewish World Service is the leading Jewish organization working to promote human rights and end poverty in the developing world. AJWS advances the health and rights of women, girls and LGBTI people; promotes recovery from conflict, disasters and oppression; and defends access to food, land and livelihoods. We pursue lasting change by supporting grassroots and global human rights organizations in Africa, Asia, Latin America and the Caribbean, and by mobilizing our community in the U.S. to advocate for global justice.

Front Cover: Gender identity terms provided by survey respondents.
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Recent celebration of Transgender Day of Remembrance. *Photograph courtesy of Association of Transgenders in the Philippines*
INTRODUCTION

“I was shocked at how hard it is to raise funds for a trans* organization.”

“It’s very hard for us to identify funding organizations with criteria that we meet ... intersex isn’t on their list.”

“We’re just not on funders’ radar.”

“As we are “T” specific, it is difficult to access LGBT funding.”

Over and over again, trans* and intersex groups tell a similar story about their efforts to secure funding. Beyond the usual challenges that any organization might face in raising money, trans* and intersex groups are particularly left adrift by the fact that few funders understand the nuances of their work or include trans* or intersex people in their giving priorities.

The authors of this report—Global Action for Trans* Equality (GATE) and American Jewish World Service (AJWS)—heard repeatedly about the difficulty of accessing funding from their grantees and the activists they partner with. Although the problem appeared universal, no data was available to support the claim, and so GATE and AJWS set out to survey trans* and intersex organizations around the world to map the current funding situation and to determine what changes in the philanthropic sector would be most helpful to strengthen these growing movements.

This report summarizes the findings of our survey of 340 trans* and intersex groups, conducted from July to September 2013. It shows current data and themes in the funding of trans* and intersex groups and the challenges and obstacles experienced by these groups in accessing resources. It also highlights key differences in access to funding between groups that are led by trans* and intersex activists, and those that are not.

Our findings show clearly that groups led by trans* and intersex activists are under resourced—yet in the midst of this challenging funding context they are doing remarkably successful work to promote the rights and improve the lives of their constituents and communities. To emphasize their efficacy and potential, this report highlights examples of successful trans* and intersex organizing efforts around the world.

Human rights and development funders have tremendous opportunities to support trans* and intersex movements. This report aims to bridge the gap between the needs of these groups and existing funding practices by providing donors with knowledge, information and recommendations for effective support of trans* and intersex movements globally.

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1 All citations not otherwise attributed come from anonymous respondents of the survey or from qualitative interviews.
2 A copy of the survey can be found on GATE’s website: http://transactivists.org/funding-survey
METHODOLOGY

The statistical findings contained in this report result from a survey conducted in 2013 by GATE and AJWS with assistance from Strength in Numbers Consulting Group. The survey sample consists of self-identified trans* and intersex groups around the world.

Survey distribution: GATE and AJWS distributed the survey through an open call in English, Spanish and French. The survey was distributed to trans* and intersex groups that are known to GATE or that are grantees of AJWS or of other funders known to support such groups, as well as to other groups identified through online research. GATE and AJWS also shared the survey on listservs frequented by trans* and intersex activists, in open and closed Facebook groups and through personal contacts of the researchers.

The respondents: The final survey sample contains 340 respondents. Each respondent represents one trans* or intersex group. To reach this final sample, we removed respondents that did not answer enough survey questions for us to consider their responses complete. We also removed any duplicate responses.

Stories and quotes: To complement the survey data and highlight examples of successful trans* and intersex organizing, AJWS and GATE conducted interviews with nine groups and drew on information provided by four grantees. Quotations in the report stem from both the interviews and from open-ended questions in the survey.

Including intersex groups: We originally set out to investigate only the situation of trans* organizations, but as the survey was developed, GATE and AJWS realized it would be a missed opportunity not to include intersex groups as well. While there are many differences in the issues facing trans* and intersex people, both communities face an extremely large gap between need and access to funding. Many of the challenges for trans* groups in accessing funding are even more pronounced for intersex groups. Just as we believe that

TRANS* GROUP SPOTLIGHT:
Transgender Equality Uganda (TEU)

In Kampala, Uganda, a small group of transwomen has come together to improve the health of their community. Transgender Equality Uganda (TEU) provides a safe place for transwomen to gather and access support and resources, including legal aid, medical care and health. TEU also intervenes to protect transwomen they hear of who may be in danger following an assault or arrest.

Beyond its successes connecting individuals with urgently needed resources, TEU has raised the profile of transwomen’s concerns among allies in Uganda and internationally by participating in coalitions concerned with HIV prevention and treatment, sex workers’ rights and LGBT rights.

TEU began receiving external funding in 2012. With access to funding, it has obtained a safe meeting place, received training for its staff in strategic planning and security measures, established regular programming, established an office, began holding regular meetings with its members, and provided transportation stipends for three members who help to run the organization. TEU’s work is only beginning, and with additional support it aims to make Uganda a place where all transwomen can count on safety, respect, health care and a dignified livelihood.

In these spotlights we use the terms provided by the group, which often carry local meaning not easily conveyed in English or outside of the locality of the group.

Photograph by Evan Abramson

3 In these spotlights we use the terms provided by the group, which often carry local meaning not easily conveyed in English or outside of the locality of the group.
trans* issues need specific and dedicated attention, we believe that intersex issues need the same. Our hope is that both intersex and trans* activists will find this report useful.

**Methodological limitations:** We outline the limitations of our methodology in order to acknowledge them and to share our learning for future surveys on this topic:

- The survey was distributed in English, Spanish and French, so groups lacking fluency in any of those languages were not able to access it.
- We distributed the survey online, via networks of donors and activists, so groups that are not connected to these networks—or who have very poor Internet access—may not have received it or been able to complete it.
- The survey included some complex language on budgets and funders, so it may have been challenging for unfunded or under resourced groups to participate.
- Fewer than 5% of respondents appeared not to be groups working on trans* or intersex issues (based on their websites or the researchers’ knowledge of their work). We left them in the respondent pool to avoid arbitrarily removing them.
- A key category of analysis was whether trans* and intersex groups were “self-led”—i.e. led by trans* and/or intersex people—yet this was difficult to assess. We determined whether a group was self-led by analyzing the self-reported sex and gender identities of the financial decision-makers of the organization; however, this presented three challenges: 1) identity terms are understood differently and overlap in varied ways across different contexts; 2) some respondents replied ‘all’ or ‘most’ to mutually exclusive identity categories (such as trans* and cisgender, intersex and non-intersex), making it difficult to interpret their data; and 3) the level of autonomy of a group is more complex than the identity of its financial decision-makers. For future studies, we recommend developing a more nuanced measurement for determining the identities of leaders and assessing whether groups are self-led.

**Glossary of Terms**

**Cisgender:** People whose self-perception of their gender matches their sex assigned at birth.

**Depathologization:** The aim of challenging the cultural understandings and medical classifications that view being trans* or intersex as a disorder, a defect or an illness. Depathologization is the political goal of many trans* and intersex activists, who want the world to view trans* and intersex bodies and identities as examples of human diversity.

**Gender variant:** People whose gender expression varies from normative definitions of femininity or masculinity, regardless of their gender identity or sexual orientation. Some people use the more politicized terms “gender-nonconforming” or “gender queer.”

**Intersex:** People who were born with chromosomes, gonads and/or genitals that vary from female and male standards. A former medical term, intersex has been reclaimed by intersex people as a personal and political identity. In certain local contexts, intersex people have also reclaimed the older term “hermaphrodite” (or, more recently, “herm”) and the abbreviation “inter*.”

**LGB / LGBT / LGBTI / TI:** Abbreviations in various configurations for the words lesbian, gay, bisexual, trans*/transgender and intersex.

**MSM:** Abbreviation for men who have sex with men, regardless of whether they identify as gay.

**Trans*:** People whose gender identity or expression differs from the gender assigned at birth. Some trans* people identify and present themselves as either a man or a woman; others identify with a non-binary gender category. Trans* people describe themselves by many different terms, some of which are specific to local cultures, including transgender, transsexual, fa’afafine, travesti, hijra, genderqueer and transpinoy—to name just a few. Many global activists have started to use the abbreviation “trans*,” with an asterisk, denoting a placeholder for the entire range of possible gender identities that fall under the broad definition of trans*.

**Transition:** Used in this report to describe the transition from one gender to another.

**Transphobia / intersexphobia:** Fear or rejection of people who are trans* or intersex, often expressed through social exclusion, stigma and violence.

**Trans* woman:** A person who is considered male at birth and who now identifies primarily as female.

**Trans* man:** A person who is considered female at birth and who now identifies primarily as male.
Human Rights Violations Against Trans* and Intersex People

In every region of the world, trans* and intersex people face serious human rights violations. They are subject to violence, abuse and ridicule in all societies. Trans* and intersex people also face barriers in accessing education, livelihoods and health care—and these challenges are magnified in poor communities where access to these resources is a problem for the entire population.

Trans* and intersex people are targeted because they disrupt the dominant assumptions about sex and gender that are central to most cultural and institutional structures. Those with ‘atypical’ body or gender presentations are especially vulnerable to violence and discrimination when this is visible or disclosed to others.

The following is a list of common human rights violations perpetrated against these communities:

Human Rights Violations Experienced by Trans* People

**Discrimination:** Discrimination in education and the workplace is a serious problem for many trans* people. For example, in several studies in Western Europe and the USA, unemployment for trans* people was 3-4 times higher than that of the general population, and many times higher for trans* people of color. In addition, a large number of trans* people in Global North countries described being forced to change jobs due to their trans* identity. Qualitative reports show that trans* communities around the world face higher rates of unemployment, underemployment and poverty. Especially in Global South countries, this is exacerbated by the fact that many trans* people have limited access to education and that many are ostracized by biological families that would have otherwise provided an economic safety net.

**Violence:** Many trans* people experience violence—including harassment, verbal abuse, physical attacks, sexual abuse, murder and suicide. Numerous reports have been written about violence faced by trans* people, including murder, and all come to the same conclusion: trans* people around the world face an extraordinary amount of all forms of violence—much higher than the general population.

**No Legal Status or Recognition:** The majority of countries in the world make it difficult or do not allow trans* people to amend identity documents (such as birth certificates, passports and national ID cards) to reflect their gender identity. Without proper identity documentation, trans* people are denied their legal status and rights as citizens. Daily activities turn into major roadblocks: buying a cell phone contract, passing a police control post, crossing a border, voting in an election, accessing health care and finding employment all depend on having accurate documentation. Argentina is the only country in the world where official identity documents can be changed to reflect one’s self-defined identity, without requiring any verification from a medical expert. In countries that allow changes after obtaining medical verification, the process is often combined with requirements such as sterilization, surgery, a mental health diagnosis or even psychiatric hospitalization. Many countries require divorce and some also loss of custody of children in order to officially change gender status.

**Lack of Access to Health Care:** Trans* people have less access to health care than the general population, due to discrimination and harassment by providers, inability to pay, lack of insurance and a host of other socio-economic barriers. It is difficult for trans* people to find health care providers who respect their gender identity (e.g. by referring to their gender correctly) and who understand their particular health needs. Discrimination in health care settings discourages trans* people from seeking care when they need it, and...
ignorance by providers and insurance professionals means that trans* people are regularly denied primary health care.

One of the most significant health care barriers for trans* people is lack of access to “gender affirming” treatment such as hormone treatment or surgery. These are unavailable to the vast majority of trans* people, even in rich countries with universal health care systems. This has a serious negative effect on the body image and sense of self-worth of trans* people, which is expressed in higher suicide rates, higher likeliness to be HIV positive and worse overall mental health among those who have not undergone medical transition to their preferred gender. In a U.S. survey a staggering 41% of trans* people reported attempted suicide, compared to 1.6% of the general population.

**Discrimination in Gender-Segregated Services:** Trans* people are discriminated against, harassed and abused in facilities where people are typically segregated by gender, including public restrooms, homeless shelters and prisons. Trans* people in prison face challenges related not only to gender segregation and violence, but also the lack of access to proper clinical care and medication—especially in relation to transition-related medical care.

**Human Rights Violations Experienced by Intersex People**

In a world that is organized around the gender binary of male and female, intersex people face serious consequences. Intersex people experience a wide range of human rights violations, including many of those mentioned above for trans* populations, as well as the following specific issues.
Medicalization: In most countries of the world, intersex babies are subjected to non-consensual surgeries and other related procedures aimed to “normalize” the external appearance of their genitals. These procedures are not justified by any medical need, and have long-lasting consequences such as genital insensitivity, sterility, chronic pain, and physical and psychological trauma. The medicalization of intersex bodies has recently reached new frontiers, extending before the moment of birth to include prenatal interventions. There is also growing evidence of the recommendation and practice of selective abortion to prevent intersex births.

The medicalization of intersex bodies violates intersex people’s autonomy and bodily integrity. It also can violate the right to health, as clinical approaches to intersex bodies are so focused on genitals that they ignore other health needs of intersex people. Further, many national health systems and insurance companies do not cover the cost of follow up care or damage repair from earlier surgeries conducted on intersex people.

Access to Identity Documents: Intersex people who identify as a different sex than the one assigned to them at birth face similar challenges as trans* people when they attempt to amend identity documents—and in some cases, their situation is worse. However, laws that permit trans* people to alter their gender on official documents may exclude intersex people because the law specifies a diagnosis or medical intervention that is specific to trans* people and doesn’t apply to intersex people. Some countries allow intersex people to amend their documents after having a physical examination, but this can cause additional psychological trauma by forcing them to recall previous experiences of medical violence.

Finally, access to clinical records, as well as to original birth certificates, is a challenge for many intersex people all around the world because doctors and others often hide or change records to avoid mention of an intersex condition and of any procedures (consensual or otherwise) that were intended to ‘normalize’ the infant. Activists report a disproportionate amount of fraud, destruction of or tampering with evidence.

Violence and Infanticide: In some cultures, intersex people and their families face extreme social rejection and violence, including infanticide. Activists in Uganda and South Africa report the possibility that parents murder intersex babies out of fear for their own safety if they are discovered to be violating taboos by raising an intersex child.
KEY MILESTONES IN TRANS* AND INTERSEX ORGANIZING

Throughout history, there have been people with bodies and identities that are what we think of today as ‘trans*’ and ‘intersex.’ In many cultures, specific roles have existed for centuries, and even millennia, for gender variant people. South Asia, for example, has a rich history of hijra communities—people with identities similar to Western trans* women, feminine men and some intersex people—that play important religious and cultural roles.

But in most cultures, the types of discrimination and violence listed in the previous section have been far too common for trans* and intersex people. In England, for example, cross-dressing was a crime—one that lives on in many colonial-era laws still on the books in countries around the world.

The first organized movement for the rights of people who today could be considered trans* emerged in Europe at the end of the 19th century, when those people started working with doctors to define their experiences as a health issue instead of a criminal one. By the late 1960s, the medical establishment had created psychiatric diagnoses for the experiences of trans* people; and yet, they were still subject to persecution, stigma and discrimination. Trans* organizing emerged to resist violence and seek self-determination for individuals and communities.

GROUP SPOTLIGHT:
TransInterQueer (TrIQ), Germany

Founded in 2006, TrIQ is a membership-based grassroots organization whose aim is freedom for all trans*, intersex and queer people to participate fully in every aspect of society and to be respected and welcomed rather than viewed as sick or strange.

Like many trans* and intersex organizations, TrIQ balances direct services with advocacy. Two part-time staff members coordinate dozens of events monthly, where members gather for support, resources, cultural activities and learning. TrIQ has also been active in media advocacy and produced a guide for journalists on how to report stories about trans* people respectfully. TrIQ members co-authored a government report on trans* people in the workforce, and are working to build support for revising Germany’s gender recognition law so that it respects the self-determination and privacy of trans* people. TrIQ collaborates with several other European trans* organizations to share strategies, skills and resources across the continent.

TrIQ is unique in Europe in that it has been a collaborative effort of trans* and intersex organizing from the beginning. But although its work is unified, its success at attracting funders has not been balanced. The group has greater difficulty securing funding to support its intersex-related work than its trans* work because funders do not know enough about intersex issues to recognize them as related to their funding priorities.

Photograph courtesy of TrIQ
Today’s trans* movements include international, regional and independent groups and activists in almost every country. Many of these groups organized in response to the HIV epidemic in the 1980s, which hit trans* communities hard. Today trans* movements support trans* people’s human rights and work to overturn the classification of gender identity disorder as a psychological illness. The priorities of trans* activists include stopping transphobia in institutions and in society; promoting legal recognition for trans* people; and securing access to health care that supports trans* people’s preferred gender identities and physiology.

Intersex activism started in the early 1990s when intersex adults began to meet and organize to resist the pathologization of intersex bodies, particularly the common medical practice of cutting the genitals of intersex infants and children—without the consent of the individual, and regularly also without the informed consent of parents—in order to make them conform to female and male body standards. After 2006, there was a surge in intersex activism caused by the emergence of a new medical terminology (“disorders of sex development”) that serves to further stigmatize intersex people as having a defect. Today there is an international intersex network with presence in multiple countries and regions and many independent intersex groups and activists working around the world. Intersex activists continue to work to bring an end to practices that mutilate or seek to ‘normalize’ intersex people, such as genital surgeries, psychological therapy and other medically unnecessary treatments.

In some places, trans* and intersex activism are independent and separate, while in other contexts, they are more intertwined. In South Asia, for example, both trans* and intersex people may be part of hijra communities. In East and Southern Africa, where the movements emerged and developed together, trans* and intersex activists are organizing around shared agendas and goals.

GROUP SPOTLIGHT: Aneka & Sangama, Karnataka, India

Aneka supports grassroots mobilization of sex workers and sexual minorities, including trans* men and trans* women, hijras, jogappas, kothi and people of other gender categories beyond the man/woman binary.

A cornerstone of Aneka’s work is a program that trains and supports community leaders to conduct research projects that address problems in their communities. The community leaders are involved in the entire process—from selecting a topic to designing the study, conducting the research and analyzing the data. One recent project was led by four trans* community members (one jogappa, two hijras and one kothi), and will culminate in the forthcoming report, “Our Health, Our Lives, Our Futures.” The report analyzes HIV prevention programs through the eyes of transgender people who have experienced them. Aneka hopes the report will inform the development of better services and empower the communities that participated to advocate more effectively for their rights.

Aneka works closely with its sister agency in India, Sangama, which focuses on advocating for better treatment of sex workers by governments and media representatives. Together Aneka and Sangama, along with other groups, have successfully brought the concerns of sex workers and sexual minorities to the attention of decision makers.

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5 Such as GATE, International Lesbian, Gay, Bisexual, Trans and Intersex Association Trans Secretariat and Transgender Europe’s Transrespect versus Transphobia project.
6 Such as the Asia Pacific Transgender Network, the Pacific Sexual Diversity Network, Transgender Europe, Transitioning Africa and REDLACTRANS.
7 There are many remaining gaps, though: some groups only represent a segment of the trans* community (for example, only people in the trans* feminine or trans* masculine spectrum), and most of the regional groups do not have active members in all countries covered.
8 Organisation Intersex International – OII, additionally ILGA provides meeting spaces through the Intersex Forum.
Whether separate or part of a joint movement, both trans* and intersex activism have complex relationships with lesbian, gay and bisexual (LGB) activism. Sometimes they are grouped together as ‘LGBTI’. While this grouping has some advantages, in many places gay and lesbian groups fail to prioritize or even acknowledge the specific needs of trans* and intersex communities, such as lack of legal recognition of their gender, forced sterilization, classification as a medical disease and genital mutilation. Many trans* and intersex respondents to our survey felt that their communities’ issues are different enough that the disadvantages of organizing under the LGBTI umbrella often outweigh the advantages.

**INTERSEX GROUP SPOTLIGHT: OII Australia**

Australia has made significant advances in respecting the human rights of intersex people, and this is largely thanks to the advocacy of OII Australia—the Australian affiliate of Organization Intersex International. The group was instrumental in securing the passage of the groundbreaking national anti-discrimination law that recognizes “intersex status” and prohibits discrimination against intersex people; and provided guidance on new federal gender identity regulations that ensure that intersex and other people may choose to identify themselves with a third ‘X’ gender marker. On top of its successful advocacy program, OII Australia is a go-to resource for information about intersex issues throughout the country and internationally.

Remarkably, OII Australia accomplishes all this with no paid staff, relying almost exclusively on the contributions of volunteer members. If the group could employ just two or three staff members, imagine what it could achieve. OII Australia hopes to provide peer support for intersex adults and families of intersex children, conduct robust policy development at the national and state levels, and provide training and educational materials to improve the understanding of intersex issues among medical providers and the broader community, in Australia and beyond.

**The Current Funding Landscape for Trans* and Intersex Work**

While foundation funding for LGBTI groups and issues has grown dramatically in the past ten years, this funding has not sufficiently reached trans* and intersex communities. This is largely because LGBTI movements have historically failed to address issues of priority to trans* and intersex people. The “T” and the “I” are often included in LGBTI organizations in name only, with little impact on the organizations’ programs, priorities or leadership. While some LGBTI organizations make genuine efforts to include trans* and intersex people in their leadership, many do not, and some are even hostile to trans* and intersex people.

Only a small number of private funders (including Open Society Foundations and the Arcus Foundation), public foundations (such as Mama Cash, American Jewish World Service and the Astraea Lesbian Foundation for Justice) and governments (including the Netherlands, the United States and Scotland) support trans* activism. Even fewer funders support intersex groups.

“**The LGB groups that gain the funding for LGBTI tend to ignore the T/I, or do not know enough about T/I to do constructive work.”**

—SURVEY RESPONDENT
The good news is that there are clear and exciting opportunities for funders to support trans* and intersex work.

There is a diverse and vibrant movement of trans* and intersex-led groups doing critical and groundbreaking work—and they could be accomplishing so much more with additional funding.

Trans* and intersex groups are organizing at every level. Local and national groups are pressing for—and sometimes winning—laws to protect gender variant children from discrimination in schools. They are providing vital health information to their members and helping them access health service providers that respectfully meet the needs of trans* and intersex people. They are providing vocational training and helping people pursue education and find jobs. They are running arts and cultural programs that aim to change social norms about gender identity and body diversity, and they are fighting for trans* and intersex people’s rights to change their legal gender without overly burdensome requirements that are prohibitive for the vast majority of sex and gender variant people around the world. Finally, they are providing spaces for trans* and intersex people to meet, organize, and build community, leadership and power so they can work to transform their own circumstances.

On a global scale, international and regional groups are working to bring about legal and policy reform by engaging in dialogue with decision-makers at the United Nations, World Health Organization, the International Olympic Committee and other international and regional bodies. They are also providing opportunities for local trans* and intersex groups to network with others in their communities and around the world, enabling groups to share strategies across borders.

**TRANS GROUP SPOTLIGHT:**

**Comunidad de Trans-Travestis Trabajadoras Sexuales Dominicana (COTRAVETD), Dominican Republic**

Comunidad de Trans-Travestis Trabajadoras Sexuales Dominicana (COTRAVETD) is an organization of trans* women and travesti sex workers that provides health information and services and trains medical providers, journalists, and decision makers about trans rights.

COTRAVETD began as a program of Movimiento de Mujeres Unidas (MODEMU), a sex workers organization comprised of mostly cisgender women. As it became clear that MODEMU’s trans* members faced specific challenges, COTRAVETD gradually built its capacity until it could launch as an independent organization. Today it is a national leader for trans* rights, working in partnership with MODEMU and other advocacy groups.

COTRAVETD trains and empowers members of its community to become effective advocates for trans rights. Its current advocacy efforts are ensuring that trans people are part of national dialogues taking place in the Dominican Republic on HIV prevention and the rights of LGBT people and sex workers. The organization plans to some day create a network of medical and community centers for trans people throughout the Dominican Republic and Haiti. As it works to develop leadership in the trans* community it is laying the groundwork to make that dream a reality.
Based on the responses of 340 trans* and intersex groups around the world, our findings show a diverse and growing movement whose impact is currently limited by a lack of access to funds and resources. At the same time, the survey reveals tremendous potential. **Funders have the ability to dramatically multiply the impact of trans* and intersex groups by providing funds and support and making the human rights of this community a significant priority in their giving strategies.**

**GROWTH, REACH AND DEMOGRAPHICS**

Trans* and intersex movements are young, diverse and growing rapidly worldwide. Based on the founding dates of groups surveyed, the total number of trans* and intersex groups has grown almost exponentially in the last decade. The majority were founded after 2005 and almost a third (29%, n=331) were founded in the three years prior to the survey.  

Trans* and intersex groups exist in every region of the world. Trans* and intersex activists are organizing all across the globe. The graph below shows the number of groups in different regions. In addition, there are sub-regional patterns; for example, there are many more groups in Eastern Africa than in Southern or Western Africa. Western Europe has more organizations than Eastern Europe.  

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9 n is used to note the total number of valid responses for that question.  
10 As described above, while the formal organization of trans* and intersex groups is recent, it is important to note that many of these groups build on long cultural histories of trans* and intersex people as well as less formal organizing.  
11 This sample is not completely representative, due to limitations in the survey methodology. For example, there were no respondents from Brazil, likely because the survey was not available in Portuguese. The fact that only two groups responded from Mainland China and Taiwan does not adequately represent the number of trans* and intersex groups in those countries.
Most trans* and intersex groups work locally, with a few global and regional groups.

Groups surveyed work primarily within their home countries, with the greatest number working at the local level (38%), national level (34%) and provincial/state level (20%). In the sample there are 22 groups stating they work regionally (7%) and six stating they work globally (2%) (n=338).

Trans* and intersex people hold multiple identities.

Within the trans* and intersex communities served by respondents, there are many populations that are of interest to funders. For example half of the groups reported that their constituents are mostly or all from low-income backgrounds (51%, n=298). A quarter of the groups reported that their constituents are mostly or all people living with HIV (25%, n=313). A third described their constituencies as mostly or all sex workers (31%, n=303).

We also asked groups about the gender identity of their constituents. Half of groups described their constituents as mostly or all trans* women (50%, n=317), a third said their constituents are mostly or all trans* men (36%, n=310), a third identified most or all of their constituents with a local term (29%, n=247), a quarter said that most or all of their constituents identify as neither male nor female (25%, n=301) and 14% said their constituents are mostly or all intersex people (n=289).

**Decision Making and Autonomy**

Many trans* and intersex groups are led by trans and intersex people, but a surprising number are not.

We found that some groups surveyed are led by trans* and intersex people (“self-led”) and others are not. This difference provides us with insight into the extent to which trans* and intersex people are able to make important decisions about their work and lead their own organizing efforts. Respondents to the survey fall into the following categories:

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12 Multiple answers were possible, which explains some overlap. Not all groups answered for each identity category, which is why there are varying total valid numbers (n).

13 We determined whether or not a group is self-led by asking whether the persons making financial decisions for the organization are trans* or intersex identified. We chose financial decision-making as the indicator of leadership because the extent to which trans* or intersex people participate in financial decision-making is a strong indicator of their power to represent their own needs, interests and voices within an organization and with funders.
• 198 are ‘self-led groups’—groups whose important financial decisions are made entirely or mostly by intersex people and/or trans* people.
Of these self-led groups:
• 148 are ‘trans*-led’—groups whose important financial decisions are made entirely or mostly by trans* people.
• 10 are ‘intersex-led’—groups whose important financial decisions are made entirely or mostly by intersex people.
• 40 are ‘other self-led’—groups whose leadership is not clearly either trans* or intersex, but which does not contain strong representation of cisgender or non-intersex people.
• 32 are ‘not self-led groups’—groups whose important financial decisions are made entirely or mostly by people who are neither trans* nor intersex.
• 110 groups did not provide sufficient or clear enough data on the gender identities of their key financial decision-makers to be categorized as self-led or not self-led.

The majority of groups in the survey are self-led (63%, n=340). There are some notable regional differences. Groups in the Caribbean, Central and South America (73%, n=51) and Asia (65%, n=54) tend to be more self-led than groups in North America (53%, n=100), the Pacific, Australia and New Zealand (53%, n=15) and Middle East and North Africa (40%, n=5).

INTERSEX GROUP SPOTLIGHT:
Advocates for Informed Choice (AIC), USA

Surgical intervention is commonplace for intersex infants in the U.S.—as in many places of the world—even though it is rarely necessary and often harmful. Advocates for Informed Choice (AIC) works to protect infants with intersex conditions from unnecessary, nonconsensual medical procedures.

AIC works to advance intersex rights through strategic legal action and community education. It challenges cases of human rights violations in court, educates medical and legal professionals about the rights of intersex people, brings together medical providers and intersex adults in dialogue about the harms done by unnecessary surgeries, and supports intersex youth leadership.

Currently AIC is part of a federal court case arguing that an intersex child’s constitutional rights were violated when he received unnecessary surgery as a toddler in the care of the state. This case has raised awareness of intersex issues in mainstream media, and if it’s successful, it will be a landmark legal victory for intersex rights. AIC has also provided expert testimony for the UN Human Rights Commission and the World Health Organization.

AIC sees many possibilities for alliances between the intersex movement and organizations focused on reproductive rights, children’s rights, trans* and LGB issues and many others. As it builds its reach and capacity, AIC hopes to forge stronger connections with other movements and with intersex groups in other countries, in order to strengthen the fight for everyone’s access to safe, respectful and consensual healthcare.
Groups want to hire from within their own communities.
Respondents to the survey indicated that their staff is fairly diverse in terms of gender identity. Many groups have staff comprised of mostly trans* or intersex people, with only a few cisgender or non-intersex staff. However, a full quarter of groups have staff that are all or most cisgender or non-intersex (n=116).

A key theme that surfaced during the research process is that trans* groups want to hire from trans* communities, but because trans* people have poor access to educational and professional opportunities, it is sometimes difficult to find trans* candidates who have the specific professional skills or qualifications a group may need. Bringing on staff from the community is essential, but may require additional resources for staff development. One leader we interviewed underscored: “We should aspire to be trans* led... Unfortunately there aren’t yet a lot of trans* people who’ve had the privilege to get the training and experience.”

Looking at other factors, 17% of staffed groups say that most or all of their staff are people living with HIV/AIDS (n=139). A quarter of staffed groups say that most or all of their staff are sex workers (25%, n=130). Approximately one in five groups are staffed mostly or entirely with people who were previously unemployed (22.6%, n=124); and over half of the groups have most or all staff (54.8%, n=135) coming from a low-income background.

Half of trans* and intersex groups are not independent organizations, constraining their ability to make important decisions about their work.
Nearly half of the trans* and intersex groups that responded to the survey are not independent organizations, but rather, are programs of larger organizations with broader mandates beyond trans* and/or intersex work (45%, n=338). Trans* and intersex groups are least likely to be independent in Middle East and North Africa (n=5), where 4 out of 5 groups operate within a broader organization, followed by 65% in Sub-Saharan Africa (n=54) and 58% in Asia (n=52).

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**It takes additional resources to bring staff on board who have the same barriers your target population will have. You cannot expect a person that was unemployed before for most of his or her life to know how to write reports... We do in-house training, but... this is the same person who’s on call for crisis intervention. Every hour we spend in training is an hour we could be spending with a community member in need or actually delivering outcomes.”**
—SURVEY RESPONDENT

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**2012 Budget (n=324) and 2013 Budget (n=338) of Groups**

<table>
<thead>
<tr>
<th>Zero dollars</th>
<th>$1 to less than $5,000</th>
<th>$5,000 to less than $10,000</th>
<th>$10,000 to less than $20,000</th>
<th>$20,000 to less than $50,000</th>
<th>$50,000 to less than $250,000</th>
<th>$250,000 to less than $1,000,000</th>
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<tr>
<td>Last Year's Budget</td>
<td>80</td>
<td>66</td>
<td>31</td>
<td>33</td>
<td>47</td>
<td>45</td>
<td>33</td>
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<tr>
<td>This Year's Budget</td>
<td>82</td>
<td>85</td>
<td>33</td>
<td>39</td>
<td>38</td>
<td>53</td>
<td>10</td>
</tr>
</tbody>
</table>
This has significant implications for the ability of trans* and intersex activists to make decisions about their own work. Only a quarter (26%) of these groups make most or all of their own financial decisions. Close to a third (32%) report that they share financial decision-making and a full 42% report that they have little or no say in financial decisions about their work (n=151). This means that a large number of trans* and intersex activists are not able to use their knowledge of their communities’ needs and priorities to make decisions about how the resources dedicated to them are spent.

Trans* and intersex groups that are part of broader organizations are somewhat more involved in decision-making about the content of their work, however. About a third (31%) are mostly or fully autonomous in this regard; just over a third (39%) share decision-making with the larger organization; and just less than a third (30%) have little or no say (n=151).

While it can sometimes be advantageous to work inside larger organizations—for example, groups can access support, mentorship or safety—it is clear that it has implications for trans* and intersex activists’ ability to make decisions about their work.

TRANS* GROUP SPOTLIGHT: Transgender Law Center (TLC), California, USA

Transgender Law Center (TLC) works to change law, policy, and attitudes so that all people can be themselves and lead lives free of discrimination and violence.

TLC has achieved many landmark victories for trans* rights in California—from protecting trans* students in public schools, to outlawing discrimination in housing and employment, easing the requirements for changing one’s legal gender, and ending the exclusion of trans* people from health insurance policies. At the national level, TLC won a ruling from the Equal Employment Opportunity Commission establishing that Federal law protects trans* people against sex discrimination, and has also worked to ensure the inclusion of trans* people in the Affordable Care Act. Because these victories are highly contested by right-wing groups, TLC will fight to maintain this legislation in the face of hateful counter-campaigns.

Moving forward, TLC is working with immigrant rights groups to protect trans* immigrants, and is advocating for trans*-inclusive healthcare across the U.S. TLC also plans to increase its collaboration with activists and other trans* groups in the U.S. and in other countries in order to build and strengthen a global movement for trans* equality.

LIMITED BUDGETS, LIMITED CAPACITY

Trans* and intersex groups operate with meager budgets. Across the board, trans* and intersex groups operate on scarce resources. More than half (54%) of groups have a current annual budget of less than $10,000. Nearly all groups (95%) have budgets of less than $250,000 a year (n=338). With such small budgets, trans* and intersex groups are deeply constrained in their ability to address the serious human rights violations outlined at the beginning of this report.

In this context, trans* and intersex groups that grow and win significant public victories quickly stand out. The most stable and well-resourced of the trans* and intersex-led groups come to be seen as cornerstones of the movement, and other groups often turn to them seeking capacity building assistance, fiscal sponsorship and mentorship. Yet even the largest of the trans* and intersex-led groups are still quite small, and maintaining their own work and funding while supporting smaller and newer groups can be a strain.

However, in a promising sign of growth, many organizations saw budgets increase over last year.
Groups led by trans* and intersex people have smaller budgets and less savings than those that are not self-led.

There are stark differences in the budget sizes of groups led by trans* or intersex people and groups that are not. Intersex-led groups have a median annual budget of $0 - $5,000. Trans*-led groups have a median annual budget of $5,000 - $10,000. In sharp contrast, groups that are not led by trans* or intersex people have a median annual budget of $20,000 - $50,000 for their trans*/intersex work.

The groups surveyed do not have significant financial stability. While non-profit industry standard is for organizations to have 3-6 months’ expenses in reserves, 68% of groups working on trans* and intersex issues have no reserves or savings at all (n=339). Of the 81 groups that do have savings, a quarter (24%) could exist on them for only two months and just over half (57%) could last for six months. As with budget size, the savings picture is worse for trans*- and intersex-led groups: 90% of intersex-led groups and 72% of trans*-led groups have no savings, compared to 47% of not self-led groups.
Trans* and intersex groups are severely under-staffed.

More than half of the groups surveyed have no full-time staff (55%, n=319) and half of the groups have no staff at all (49% n=340). Of the groups that have full-time staff members, over half (54%) have 4 or fewer, and 80% have 10 or fewer (n=145).

A much smaller proportion of trans*- and intersex-led groups (46%, n=198) have paid staff, compared to groups that are not self-led (84%, n=32). Clearly, trans* and intersex groups do not have sufficient staff capacity to carry out their critical work.

**Current Funding for Trans* and Intersex Groups**

Trans* and intersex groups are severely under-funded.

Only half of the groups surveyed receive external funding for their trans*/intersex work (50%, n=333). More than half of those who do not have funding have tried to get it in the past but have not succeeded (56%, n=133).

Trans*- and intersex-led groups have significantly less access to funding than those that are not self-led.

The composition of groups’ leadership has an influence on their abilities to obtain funding. While 59% of groups not led by trans* or intersex people receive external funding (n=32), only 50% of intersex groups (n=10) and 54% of trans*-led groups do (n=145).

The most common funding sources for groups are foundations, donations and community fundraisers.

The most common sources of income for groups are foundations, donations from individuals or businesses, and community fundraisers. Least common are governments and international organizations. Again, the composition of a group’s leadership is a significant factor in their access to particular types of donors. For most types of donors—especially foundations—groups that are not self-led have more access than groups that are. Intersex-led groups have the least access to funders across the board.

### 2013 Funding Sources for Groups (n=335)

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation Donors</td>
<td>28%</td>
</tr>
<tr>
<td>Donations from Individuals or Businesses</td>
<td>27%</td>
</tr>
<tr>
<td>Community Fundraisers, Membership Fees, Etc.</td>
<td>21%</td>
</tr>
<tr>
<td>International Organizations</td>
<td>13%</td>
</tr>
<tr>
<td>Government of Home State or Province</td>
<td>11%</td>
</tr>
<tr>
<td>Government of Home Country</td>
<td>9%</td>
</tr>
<tr>
<td>Government of a Different Country</td>
<td>7%</td>
</tr>
</tbody>
</table>
There are some key regional differences in groups’ access to different types of donors:

- Foundation grants reach half of groups in Eastern Europe (56%, n=18), a third of groups in Latin America and the Caribbean (32%, n=50), a third of groups in Sub-Saharan Africa (n=54), a third of groups in Asia (30%, n=52) and a quarter of groups in North America (26%, n=99). But foundations are a less common source in the Pacific (13%, n=15), Western Europe (18%, n=44) and the Middle East and North Africa (0%, n=5).

- In Sub-Saharan Africa, the region most affected by HIV/AIDS, there is a notably low level of funding for trans* and intersex groups in Sub-Saharan Africa from international organizations such as the Global Fund to Fight AIDS, Tuberculosis and Malaria and the United Nations (11%, n=54).

- National governments play the largest role for groups in Western Europe (27%, n=44). State/provincial governments also play a role in Western Europe (23%, n=44), as well as in Asia (15%, n=52), North America (12%, n=99), and the Pacific (13%, n=15).

For many groups, registration is an important factor in accessing funds.

Many funding sources are only available to organizations that are legally registered in their countries. The majority of groups surveyed are registered (67%, n=327) and this has had a positive impact on their ability to access funds. Registration and budget size are linked: registered groups have larger budgets than unregistered groups. Registered organizations have a median budget size of $10,000 - $20,000 (n=221), while groups not registered or whose status was not known have a median budget size of $0 - $5,000 (n=106).
HIV/AIDS funding is a major source of resources for trans* groups. This funding is needed but can also be counterproductive.

More than half (56%) of groups with external funding receive at least some funding for HIV/AIDS-related work, including a little more than a quarter (28%) of groups that receive most or all of their funding for this purpose (n=166). None of the intersex-led groups received any funding for HIV/AIDS work, though some of the ten intersex-led groups do work in this area.

There are notable geographic distinctions in the distribution of funding for trans*/intersex and HIV issues. While less than 30% of funded groups in Europe (n=42) and the Pacific (n=7) receive any HIV/AIDS funding, in Sub-Saharan Africa (n=24), Asia (n=27) and LAC (n=24) such funding is vital, with around 40% of funded groups from these regions indicating that most or all of their funding is dedicated to HIV/AIDS work.

HIV/AIDS-related funding is important for trans* groups. However, groups report that HIV/AIDS funding can lead to increased stigma if the only trans* work being done is HIV/AIDS-related. In some countries, trans* people only have access to dedicated HIV services, but not to the broader healthcare system. Further, HIV funding often targets trans* women as a subset of men who have sex with men (MSM), conflating gender identity with sexual behavior and failing to respect trans* women's gender identity; this means that other trans* people do not receive support from HIV funding streams, which often drives wedges in communities along the lines of sex and gender.

**Barriers to Accessing Funding**

Groups working on trans* and intersex issues described the following barriers in accessing funding and made recommendations for funders seeking to support the trans* and intersex community:

**INTERSEX GROUP SPOTLIGHT: Support Initiative for People with Congenital Disorder (SIPD), Uganda**

In Uganda, most infants born with intersex conditions receive no medical assessment. Some are killed soon after birth, and others are hidden out of shame and fear. For the few families who can afford medical care, the interventions, like in other parts of the world, are usually harmful and unnecessary. Intersex teens and adults sometimes need follow-up care, such as hormone replacement therapy, which is often unavailable or impossible to afford. Many intersex people are ostracized, expelled from school and ejected from housing.

Support Initiative for People with Congenital Disorder (SIPD) works to protect the human rights of intersex children and adults born into this challenging context. It works within communities to provide information, counseling and referrals intersex adults and parents of intersex children. It also documents abuses and educates the public and officials through media outreach, awareness trainings and advocacy. SIPD’s documentary, “My Secret Life,” has been screened at health conferences, and the organization will release a new film on intersex children in schools in the coming year.

*Photograph courtesy of SIPD*
Groups do not know where to look for funding or how to make contact with donors.

By far the most common request from survey respondents is for donors to publicly state that they are willing to support trans* and intersex groups and to do active outreach to identify potential recipients. One respondent asked that funders “Let us know on their websites that they support our groups and would consider funding them.” Another asked that funders explicitly name trans* and intersex people as target groups. Many respondents suggested more active outreach to trans* and intersex groups, especially small grassroots groups: “In our country there are large organizations or activists who already have international recognition and are receiving funding, but they are not the only ones that work on the topic.”

Application procedures are too complicated and surpass the capacity of groups.

Many groups reported that their volunteers and staff are unable to fill out complicated funding applications, often in languages that they do not speak. Lack of capacity to apply for grants (including time, language fluency and education) is a significant constraint to securing funding. One group said, “We need to get the requirements of their funding to be reduced … because many trans and intersex people … do not graduate from college or even high school following the rejection and abandonment of their family and community.”

Many groups would like to have help with preparing proposals for funding, and some suggested that funders should take the time to help them write grant applications and guide them through the process. One group suggested that funders “allow for first-time applicants to call and have someone work with them on the application.” Groups would also like to get more feedback on unsuccessful funding applications, so that they can learn from the experience to improve future proposals.

Another related challenge named by groups is their capacity to manage grants once they are received.

Donor priorities do not match groups’ needs.

Another often-mentioned problem is the difficulty of matching funders’ priorities with needs prioritized by groups. In many cases, groups are forced to change their own priorities in order to secure funding. “Be aware of power dynamics between funders and grantees,” noted one group. “Some grantee organizations will agree to whatever the funder wants because they feel that they’re unable to challenge the funder or they will lose funding. This is a big problem as it means that the priorities of community...”
members are considered less important than funders’ priorities.”

One of the most frequently cited obstacles is that many grants available to trans* communities are restricted to HIV-programming, and are not available to intersex groups. One respondent put it this way: “Most funding ... is related to HIV but there are many health issues affecting trans and intersex people which are not necessarily related to HIV. This creates a tricky situation because many groups will simply create a link to HIV work in their programs just to be able to access some funding. This is very detrimental to organizing and sustainable change if we are conducting the wrong activities simply to target funding.”

Other programming issues named were the focus on short-term funding for projects and the lack of attention to priority concerns for many trans* and intersex people, such as social services and transition-related health care.

Several groups urged donors—especially governments—to provide more flexible, long-term funding that will enable them to flourish. One group said, “Governments need to understand the work we're doing is usually pioneering, with few precedents and not a lot of evidence on which to base programs, so guidelines need to be very flexible.” From another: “Ensure our long-term survival. Governments and other donors provide money, but only for a while and with many conditions.”

Funding goes to groups supporting the gay and lesbian community or men who have sex with men and does not reach trans* and intersex groups.

In an open-ended question about issues with funders, over 30 trans* and intersex groups expressed frustration that funding does not reach them and instead goes to LGB groups, MSM groups or AIDS service organizations. These organizations often have no trans* or intersex people in decision-making
positions and no interest in actively pursuing an agenda that is supported by trans* and intersex communities, for example through specific programming.

One respondent reported a “lack of a sense of urgency by LGB organizations, for devoting any of ‘their’ funds to assist trans organizations.” Another said: “the money goes to [organizations with] professional grant writers … The biggest problem is that trans people mostly are excluded from education, very few have degrees, very few know how to talk to decision makers.” “Most of the funds come through the MSM network and trans groups are not properly consulted in preparing the proposal and trans groups do not know how much money they will get when the proposal is accepted,” wrote one respondent.

Governments do not fund trans* and intersex issues.
71% of groups that have sought external funding believe their national governments have no interest in providing support (n=217). According to respondents, government funding—whether from state or provincial governments, national governments or foreign governments—is the least likely source of funding for trans* issues overall.

Groups are ineligible for funding because of their location or constituency.
Groups in rural areas, in francophone and other non-English-speaking countries, and in high-income countries report ineligibility for funding. Aside from location, trans* men groups reported problems with ineligibility, most likely because HIV-focused funders do not perceive them as a key affected population.

Donors may not understand trans* or intersex issues.
Groups reported that many donors lack knowledge about trans* and intersex issues. For this reason, many groups find that they have to educate potential donors prior to asking for funding.

Lack of data may deter donors from funding trans* or intersex groups.
Lack of data on the number of trans* or intersex people in society appears to be a barrier for some donors, who may believe that the problem is not ‘big enough’. Some donors also require evidence on the existence of violations faced by groups—and since so little documentation of these violations has been done by governments or reputable institutions, groups are unable to meet the requirements for funding. One group shared, “In the absence of any studies on Inter / Herma, we could not justify the needs of this population [to funders].”

**Programming and Goals for Growth**

Most groups focus on advocacy and attitude change.
The vast majority of trans* and intersex groups work on two main issues: changing attitudes in society toward trans* and intersex people (86%, n=320) and advocating for laws and policies that respect and promote the human rights of trans* and intersex people (79%, n=315).

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“… grantees who ‘add the T’ or ‘add the I’ without specifically funding the issues prioritized by our communities are actually sucking money out of the communities – donors assume we are receiving funding when we aren’t.”
—SURVEY RESPONDENT
Groups want to expand to provide direct services. Although these two goals are paramount, many groups expressed the desire to expand to provide direct services to trans* and intersex communities. 35% of all groups, including 56% of intersex-led groups, want to provide social services and 31% want to provide health care. These are not issues that many of the current funders for trans* and intersex issues usually support, but they reflect the needs of communities. Safety and anti-violence work, arts and culture, and patients’ rights advocacy are also high on groups’ priority lists.

For many trans* and intersex groups it is impossible to fully separate advocacy work from service provision. In the absence of other organizations available to meet pressing community needs, a group’s ability to support its members and constituents in accessing services can help create the baseline of stability needed to sustain the group’s advocacy. This applies to leaders of groups, as well. In order to build strong and effective movements, access to services—including psychosocial support—is crucial, given the systemic trauma, violence and exclusion from society that trans* and intersex people face.

Groups want to provide health care as a vehicle for strengthening movements overall. Groups report that it is next to impossible to find funding for gender transition or other health-related costs, which is a high priority for their members. This is particularly crucial for grassroots groups working to build a base for sustainable activism. Groups struggle when members are vulnerable and frequently in crisis. Several groups mentioned how one member’s health crisis had a significant impact on the other members and on the organization’s work. Constituents or members who lack a baseline of stability in terms of basic health and livelihood will reap less benefit from programming and will be able to put less energy into advocacy activities. Funders should look for ways to support groups to meet these needs.

In addition to these top priorities, groups are also interested in increasing outreach and education, providing counseling and psychosocial support, offering capacity building and mentoring, providing legal services and creating social spaces.

Direct HIV work is notably a lower priority for most groups, compared to other issues. However, activists’ top priorities—such as changing attitudes and decreasing stigma—are key to addressing the HIV epidemic in many trans* communities. Funders focused on HIV/AIDS should provide support for trans* groups to address the root causes of stigma and discrimination as a long-term strategy to fight HIV and improve health.

The composition of leadership affects groups’ priorities. There are a few key differences in programming of groups that are led by trans* people, intersex people and others. Intersex-led groups, for example, list social services, safety and the provision of support groups as very high priorities, but health care is notably absent from their priority lists while it is high on the lists of trans* groups. Funders should be as flexible as possible in their funding, allowing trans* and intersex groups to identify and address the particular needs of their communities.
How Donors Can Be Partners: Additional Support

In addition to core funding, trans* and intersex groups seek other kinds of support from donors. The survey revealed that groups have three strong priorities for additional support: 1) networking and exchanges with other trans*/intersex groups, 2) skills training and 3) mentoring programs for group leaders. Other types of support, such as political support from allied organizations, introductions to politicians and decision-makers and support from religious groups, are not as high on groups’ agendas.

Groups want opportunities to network and work together with other groups.

These findings are a clear call to donors to fund networking and exchanges for trans* and intersex groups. After attending an international trans* health conference, one intersex leader said: “Exposure to other intersex activists from around the world is helping us to study and gauge their successes against our own as well as against our challenges. These networks are helping us form a bigger resource base when it comes to search for information, experts, and dissemination of our own best practices and experiences. This way ... international intersex voices can be heard by local constituents, building greater solidarity.” After attending an International AIDS Conference, a trans* group leader shared: “The international experience and the opportunity to be visible in international spaces reinforces our advocacy capacity and helps to contextualize for us the defense of human rights and positioning relative to different decision makers.”

Despite this great need, there are few opportunities for trans and intersex groups to work together. Large international and regional meetings for trans* activists take place in Europe and the United States—but only rarely in other parts of the world. It is often impossible for many trans* leaders to travel to those events—usually because of lack of funds. Activists in rural or hard-to-reach places (such as Pacific Islands) experience particular isolation. With more opportunities for groups to convene—or the provision of additional funds to enable groups to attend convenings—this isolation could be overcome and groups could work together to build stronger, more cohesive movements.

Groups want skills training.

Groups express a desire for training on a wide variety of skills that would increase their capacity to organize and serve their communities. Fundraising and grant writing skills are the top priority of the majority of groups, with program development and financial management second and third. The priorities for skills training vary by region (see second table, next page).

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<table>
<thead>
<tr>
<th>Non-Financial Support Desired Most (n=312)</th>
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</thead>
<tbody>
<tr>
<td>Networking and exchange of ideas with other trans*/intersex groups</td>
</tr>
<tr>
<td>Skills training</td>
</tr>
<tr>
<td>Mentoring program for organizational leaders or staff</td>
</tr>
<tr>
<td>Political support from allied organizations</td>
</tr>
<tr>
<td>Introduction to politicians and decision-makers</td>
</tr>
<tr>
<td>Support from religious groups</td>
</tr>
</tbody>
</table>

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14 Such as the biannual Transgender Europe Council or the annual Philadelphia Trans-Health Conference, Gender Odyssey, Fantasia Fair and Southern Comfort.
Skills Training Desired Most (n=311)

All Regions

- Fundraising and Grant Writing: 64%
- Program Development: 39%
- Budgeting and Financial Management: 37%
- Political Advocacy: 33%
- Community Organizing: 29%
- Leadership Development: 24%
- Monitoring and Evaluation: 23%
- Working with News Media: 20%
- Managing Staff: 13%
- Social Media: 13%
- Safety and Security: 9%

By Region

**North America**
1. Fundraising, including writing grant proposals and reports
2. Program strategy and development
3. Community organizing

**Latin America & Caribbean**
1. Fundraising, including writing grant proposals and reports
2. Budgeting and financial management
3. Political advocacy
4. Personal development/personal leadership qualities
5. Safety and security

**Africa**
1. Fundraising, including writing grant proposals and reports
2. Budgeting and financial management
3. Political advocacy
4. Program strategy and development
5. Community organizing
6. Monitoring and evaluation

**Europe**
1. Fundraising, including writing grant proposals and reports
2. Political advocacy
3. Program strategy and development
4. Community organizing

**Asia**
1. Fundraising, including writing grant proposals and reports
2. Budgeting and financial management
3. Program strategy and development
4. Monitoring and evaluation
5. Safety and security

**Pacific**
1. Program strategy and development
2. Fundraising, including writing grant proposals and reports
3. Budgeting and financial management
4. Monitoring and evaluation
5. Political advocacy

(bold = more than 50% of groups mentioned, others = more than 30% of groups mentioned)
CONCLUSION: RECOMMENDATIONS FOR DONORS

We offer the following recommendations to help bridge the gap between the needs of trans* and intersex groups and current funding practices. We hope funders will use these recommendations to increase their support of trans* and intersex groups, enabling donors and activists to work effectively together to realize the rights of trans* and intersex people.

1. **Fund intersex groups and trans* groups as distinct areas of work, not subsumed under the LGBTI or “trans and intersex” (TI) umbrellas.** Some LGBTI groups are doing useful work around trans* and intersex rights, but most have not prioritized these issues and most do not have the expertise to do this work well. Similarly, some trans*-focused groups are doing effective work with intersex communities, but many are not. Look for independent intersex and trans* groups and fund them directly. If you are funding LGBTI groups or TI groups, ask them how they prioritize trans* or intersex work. Also ask them how trans* and intersex people play leadership and decision-making roles within their organization.

2. **Include trans* and intersex work in every relevant area of your grantmaking strategy.** If you fund girls' and women's education, consider how education projects for trans* women, trans* men perceived as women, and trans youth fit into that portfolio. If you fund reproductive health and justice, consider projects to protect intersex people's right to self-determination and bodily integrity. Trans* and intersex work fits naturally into a wide range of issue areas, from employment and education to health care access and reproductive justice, from arts and culture to legal reform.

3. **Support groups that are led by trans* or intersex people.** The extent to which a group's leaders reflect the communities it serves is a crucial indicator of whether the group is truly in touch with its community and whether it is enabling trans* and intersex people to make decisions and set priorities. In order to realize the rights of trans* and intersex people, money must be put directly in the hands of trans* and intersex activists themselves.

4. **Recognize the diversity of trans and intersex communities and respect local definitions.** Gender is an incredibly complex social phenomenon. Many groups have adopted the terms “intersex” or “trans*” but those terms hold different meanings in different cultural contexts. Assume that the range of people included in these categories (including the extent to which intersex people are in trans* communities) differs from place to place. Be familiar with general definitions and also be ready to learn the local terms and understandings in each location where you work.

5. **Seek groups whose work is representative of the communities they serve.** Some groups focus on one specific demographic of trans* or intersex people and others reach communities with significant diversity with regard to gender, sex and bodies. In evaluating an organization for funding, ask whether it is truly representing the full range of trans* or intersex people it claims to represent. For example, if a program targets all trans* people, is it effectively reaching the range of trans* people living in that community, or is it weighted toward trans* men, trans* women, or another group? Different trans* and intersex communities may require different funding strategies.

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\["The only way to empower trans communities is to have them create their own programs beneficial for the community. This way, trans groups are liable to the development of their communities..."

—SURVEY RESPONDENT

\["Trans work tends to be relegated to the foundations’ LGBT portfolios (if those exist) and not considered by other program officers, even though many of our projects may be more aligned with portfolios focused on public health, access to jobs, poverty or school success."

—SURVEY RESPONDENT
intersex populations have different needs, and there may need to be multiple groups in a given locale in order to serve the diversity of communities there. If a group is serving only one segment of a diverse community, consider whether it should expand its reach, or whether it is appropriately targeted and should partner with other groups from other segments of the community.

6. Pay specific attention to groups working with trans* and intersex people who are marginalized in multiple ways. Trans* and intersex people who are additionally affected by discrimination based on class, race, disability or other factors are likely to get left out of development programs and sidelined within organizations. People facing multiple discriminations are often in greatest need of assistance. In addition, ask what, if anything, groups are doing to support leadership development in the most marginalized parts of the community. Projects created by and for the most marginalized people are powerful sites for transformation.

7. Help groups hire from affected communities by funding and providing capacity building and professional development opportunities. It is an asset of trans* and intersex groups that their staff, for the most part, reflect the realities of their constituencies. It means that staff are likely to have a deep understanding of the problems, insight into possible solutions, and knowledge of how best to mobilize their communities to action. However, it can be challenging to find qualified candidates for some positions. Funders can help by providing additional support for training, mentorship and professional development. Capacity building should be combined with core support, and needs should be identified and prioritized by groups themselves. Supporting peer exchanges and peer-led learning among trans* and intersex groups is one promising approach. Donors should also recognize that taking advantage of these opportunities can be time-intensive for grantees. In a small organization, taking staff out of the office for training can impact the group’s ability to do its work, so donors should include additional funding to ensure sufficient staff coverage during capacity building activities.

“Work directly with our trans organizations, without intermediaries such as technical assistance NGOs receiving our resources and getting most of them. We should receive resources directly and funders should support us to have good management, at least the first few times.”
—SURVEY RESPONDENT

TRANS* GROUP SPOTLIGHT: Santi Seva, Bhadrak, Orissa, India
Santi Seva began as an informal community network of hijras, maichiyas, and other trans* women people in Orissa, who started to organize in 2006 to try to meet their community’s needs. Santi Seva was launched with assistance and encouragement from SAATHII, an NGO that supports HIV prevention work in the area. SAATHII helped produce Santi Seva’s first fundraiser, which generated enough revenue to launch a livelihood micro-loans program and establish an emergency health fund. With support and ongoing capacity building assistance from SAATHII, Santi Seva took off.

In seven years, Santi Seva has become a vital community resource. Today it runs programs for hundreds of people, including financial self-help groups, non-formal adult education, HIV and general health services, and more—resulting in marked improvements in livelihood, literacy and health. Santi Seva has also brought trans* concerns to the attention of government and media through participation in state- and national-level coalitions.

Santi Seva’s success was made possible by the organizational assistance received from SAATHII, whose commitment to supporting grassroots leadership ensured that Santi Seva remained rooted in the community it serves even as it grew.
8. **Provide general operating support and multi-year grants, and seek to streamline funding procedures.** General operating support enables groups to pursue their own priorities, as well as cover necessary administrative costs. Multi-year grants provide essential financial stability. Further, there is an opportunity cost in seeking funding, and too much time spent on drafting applications and reports can take away from a group's capacity to implement programs. Make sure that the time and resources a group must put into your application and reporting processes are surpassed by the value of the support you provide.

9. **Train foundation staff on trans* and intersex issues, and hire trans* and intersex experts in your funding organization.** If program staff do not understand trans* and intersex communities or the issues that trans* and intersex groups are working on, they will have a hard time assessing potential grantees or explaining the work to trustees. Not only those who work with these groups specifically, but all program staff, should know enough to recognize when a trans* or intersex group project would be a good fit for their portfolio. Donors should also be thoughtful about hiring trans* and intersex-identified staff—not necessarily only for their trans* or intersex-related work—as part of diversity strategies.

10. **Track your funding for trans* and intersex issues.** Lack of data about funding for trans* and intersex work is an impediment to identifying and filling gaps in the funding landscape. Track and report your support for trans* and intersex issues, which will enable funder networks and institutions like the Foundation Center to track changes over time.


